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Religiosity and Subjective and Psychological Well-being in Contemporary Japan

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Religiosity and Subjective and Psychological Well-being in Contemporary Japan

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Dedication

This dissertation is dedicated to my family (MKAK, MYKM, and KKEC), my professors and advisors, and my friends and informants in Japan.

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Religiosity and Subjective and Psychological Well-being in Contemporary Japan

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Relationships between religion and health have received considerable academic attention. Scholars have published hundreds of articles concerning links between religion and mortality and physical, subjective, and psychological well-being. Despite the practical and scholarly importance of these studies, do similar relationships exist in non-Christian, non-Western societies? In this dissertation I employ qualitative and quantitative methods of research to examine connections between common religious beliefs and practices and general, subjective, and psychological well-being in contemporary Japan.

Ritual behaviors and beliefs in Japan differ substantially from those of the U.S., and as expected, there are important cultural distinctions concerning these associations. However, there are similarities that are equally noteworthy, and I discuss these findings and describe theoretical rationales that help explain how and why Japanese religiousness is linked positively and negatively to well-being in Japan. The first chapter provides an

overview of some of the core aspects of contemporary Japanese religiousness, and I introduce new findings from a large national dataset of Japanese adults concerning religious affiliation. In the second chapter, I use in-depth interview data to support theoretical explanations concerning associations between typical household ritual practices and general well-being. The third chapter reveals strong positive correlations between life satisfaction and happiness (subjective well-being) and religious affiliation and devotion. In the final chapter, I use multivariate analysis again to explore links between psychological distress (measured by the Center for Epidemiological Studies Depression Scale) and religiousness. The data for this chapter come from a self-administered survey I designed to address the lack of valid survey questions concerning religious practices and beliefs in Japan and to assess their ties with mental health.

Overall, the results of these separate studies indicate strongly that religiosity is multidimensional and that different dimensions impact Japanese well-being in diverse ways. They also provide substantial evidence for the need to be cautious when conducting cross-cultural research. This dissertation aims to fill a void concerning the study of religion and health in a non-Christian Asian nation, and it is hoped that these findings will encourage further research on this topic in Japan and in other areas of the world.

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Introduction

For over a century, social scientists have been examining associations between religion and well-being. Durkheim's (1897) seminal nineteenth century work on religion and suicide is the first noted example in this line of research. Decades later, in the 1950s, scholars began using secondary data to explore the extent to which religious value systems, social support networks, and attendance, for example, were correlated with positive mental health (see e.g., Gurin, Veroff, and Feld 1960). Richard McCann (1962) dedicated an entire volume of the Joint Commission on Mental Illness and Health Monograph Series to this relationship, and he used interview data to examine how clergy and lay members can play important roles in the administration of aid to community members with mental health problems—from serious to relatively minor.

Although research continued sporadically in the 1970s and 1980s, the past two decades have seen a resurgence of publications that reveal strong connections between different dimensions of religion and subjective well-being (see e.g., Ellison 1991; Krause 2006a) and mental (e.g., Ellison et al. 2001; Levin and Koenig 2005) and physical health (see Bono and McCullough 2004; Musick 1996). Others have addressed the impact of selection effects concerning physical health (Idler and Kasl 1997; Musick and Worthen 2008), general well-being (Regnerus and Smith 2005), and mortality (e.g., Hummer et al. 1999; Musick, House, and Williams 2004; Rogers, Krueger, and Hummer 2008). These latter studies represent a growing body of literature that concerns associations and causal effects of different aspects of religion and well-being in the United States (for general reviews, see Ellison and Hummer 2008; Koenig, McCullough, and Larson 2001; Seeman, Dubin, and Seeman 2003).

Despite the practical and scholarly importance of these studies, overwhelmingly they are limited to Christian populations in the United States. The purpose of this dissertation is to test some of these findings and theories in a non-Christian, non-Western society: Japan. Specifically, I use quantitative and qualitative data to assess whether religion in Japan is related to subjective well-being (life satisfaction and happiness), general well-being, and psychological distress (based on the Japanese Center for Epidemiological Studies Depression Scale, CES-D). Overall, I found that there are commonalities between results from research in the U.S. and with these data on Japan. There are also some important distinctions, and these may be attributed to cultural differences, such as dissimilar religious expressions, experiences, practices, and beliefs. In the chapters that follow I explain these variations and apply theoretical explanations to improve our understanding of how these relationships work—in general and, more particularly, in Japan.

WHY JAPAN?

Like the United States, Japan is a highly modernized, post-industrial democratic nation. On the surface, at least, Japan is similar to the U.S. in these regards. On the other hand, other social norms—especially religious—vary dramatically from the U.S., making it an ideal country in which to test some of the theories previously applied to non-Asian populations (cf. Miller and Stark 2002). For example, the most common religions in Japan are polytheistic, and the Japanese have spent centuries creating a syncretistic blend of, mainly, Shintô, Buddhist, and folk rituals and beliefs that tend to intermingle with daily secular activities as "part of their culture" (Miller 1998:368; see also Kawano 2005; Martinez 2004; Ohnuki-Tierney 1984). Another important aspect is an emphasis on rituals over doctrines and theology. Although both Buddhism and Shintô have texts that are considered sacred, the average Japanese has limited knowledge of these texts, and very

few people regularly attend worship services or listen to priests discuss them. Even more than 'belief', rituals are the most common expressions of religiosity in Japan (see Kawano 2005; Kisala 2006; Reader 1991; Roemer 2006; Traphagan 2004, 2005; Yanagawa 1991), and for these reasons, often Japan (falsely) appears much less religious than other societies (cf. Okada 1994).

It is also important to note that religious membership differs significantly from congregation- or church-based communities in the United States. The most recently published statistics reveal that, in 2005, there were approximately 157,067 officially registered Buddhist temples and Shintô shrines and only 9,376 Christian churches and related organizations (Statistics Bureau 2008:747). Though there are many shrines and temples affiliation with these places of worship is most often based on geography and heredity, rather than on one's religious motivations (cf. Davis 1992; Kisala 2006; Traphagan 2004, 2005). Generally, Japanese are automatically claimed as members by their local shrine (as *ujiko*) simply because they reside within its district. Similarly, in the case of Buddhist temples, though many Japanese will state that they are affiliated with the temple where their ancestral tomb is located, typically living household members do not choose this connection. Most Japanese do not consider themselves members of any shrine, temple, or church, and they will visit various places of worship throughout the year based on their spiritual and practical needs (see Reader and Tanabe 1998).

Exclusive devotion to one place of worship or religious institution in Japan is limited predominantly to members of certain 'New Religions' and to many Christians. Because many New Religions and Christian denominations emphasize individual faith in a community experience and because these members tend to join on their own accord, these religions are quite unlike Buddhism or Shintô (cf. Morioka and Newell 1968:9). There are some key differences, therefore, between Japanese mainstream religiosity and the

predominantly Christian populations that have been studied in the U.S. Similar to the U.S., though, religion remains an important social force in Japan (see e.g., Davis 1992; Kawano 2005; Martinez 2004; Reader 1991; Traphagan 2004).

RELIGION, SPIRITUALITY, AND RELIGIOSITY/RELIGIOUSNESS

In this dissertation, I make a conscious effort to avoid discussing Japanese "religion". Briefly, the word "religion" (*shûkyô*) tends to have a pejorative connotation in Japan, and it is most often associated with organized religions. Though some scholars argue that there is one "common" Japanese religion (see e.g., Bellah 1985; Reader and Tanabe 1998; Robertson 1987; Takayama 1998), rituals and faith systems tend to vary by location or community and such diversity makes it difficult to interpret these trends as a single entity.

In place of "religion," in the past decade, the term "spirituality" has been used on occasion to describe Japanese rites and faiths concerning the sacred. Similar to the word *shûkyô*, however, the Japanese terms most frequently used for 'spiritual' have ambiguous meanings and are not part of the daily vernacular. Scholars and health care personnel sometimes use terms such as *reisei*, *seishin*, and the English-borrowed term *supirichuaritei*, but they convey little concrete meaning to the average Japanese (Ando 2006). Though they tend to imply less of a connection with organized religions, very few Japanese are likely to describe their behaviors and beliefs with these words.

At present, there is no consensus for a single term that accurately describes the practices and beliefs of Japan (see also Fitzgerald 2000). Because of the aforementioned concerns with words such as 'religion' and 'spirituality', in this dissertation I will use the terms "religiosity" and "religiousness" interchangeably. In qualitative research projects in Japan, I have successfully used the word *shûkyôteki* to encompass these behaviors and faiths in interviews. Literally, *shûkyôteki* can be translated as "religious*ness*" or

"religious-*like*". For some Japanese, it appears to conjure up the sacredness of the word "religion" without focusing on the institutional aspects. Its application here is for purely heuristic reasons, though, and I do not claim that it is significantly superior to all other Japanese terms. Because of the inherent problems with the word "*shûkyô*" and the recent introduction of the terms for "spirituality" in Japan—except where appropriate (e.g., Chapter 1), I avoid using these words to describe the rites and beliefs surrounding Japan's myriad of sacred beings and household ancestors and other religious contexts—including those intermixed with the secular, such as festivals, pilgrimages, and shrine or temple tourism.

RELIGION AND WELL-BEING IN JAPAN

Although there are only a handful of studies that address links between religion and health in Japan, they provide important models for the present study. Based on extensive fieldwork conducted in 1979 and 1980, anthropologist Emiko Ohnuki-Tierney discovered that Japanese often visit temples and shrines to seek personal health or to pray or purchase *omamori* (amulets) or *ema* ("prayer boards" 1984:137) for the well-being of others. She discusses at length the influential "*symbolic*" roles that these religious establishments play in daily well-being (166, emphasis added). Though mental and physical health are by no means the sole reasons for these visits, they are common (see also Lock 1980; Nelson 1996; Reader and Tanabe 1998). Studies on religious healing indicate that certain practices and beliefs help restore balance in an individual's life—a crucial aspect of health in Japan (see Chapter 4), and that some New Religions tend to emphasize salvation, doctrine, and an "existential" connection that promote wellness. Especially since the 1990s, religious and secular 'healing' practices have also become increasingly popular for Japanese of all ages (Yumiyama 1995:269).

Additionally, recent studies by anthropologists John Traphagan (2004) and Satsuki Kawano (2005) show connections between religious behaviors and beliefs and certain health benefits in Japan. According to Traphagan, "Japanese religious practice is most directly associated with the wellness of being, both for the living and the dead" (2004:19). Here, he is stressing a culturally important reciprocal relationship: the ancestors protect the living relatives and the living keep the memories of the dead alive by conducting certain rituals (see also Klass 2005; Martinez 2004; Plath 1964; Smith 1974). These qualitative studies indicate that by making offerings at home ancestral altars (*butsudan*) and household shrines (*kamidana*), visiting public shrines or temples in times of need, and participating in or attending festivals (Roemer 2006, 2007), Japanese reinforce and develop relationships with their ancestors, *kami* (gods, spirits, or deities), and buddhas (Kawano 2005) to assure their overall well-being.

Using survey data, Neal Krause and colleagues discovered significant, positive correlations for older Japanese between self-rated health, religiosity, and giving social support (1999b) and religious beliefs, death of a loved one, and reduced levels of hypertension (2002). Applying similar methods, Tagaya et al. (2000) sampled over 1,900 Japanese elderly from a small rural town and found strong positive relationships between social support and prayer and religious attendance. Elsewhere, I have noted similar connections between social support and ritual involvement in an ethnographic study (Roemer 2007). Shatenstein and Ghadirian (1998) discuss how the restricted diet of select Buddhists and Seventh-Day Adventists in Japan is linked to lower cancer and mortality rates. Finally, Japanese psychologist Ryô Nishiwaki (2004) found statistically significant associations between belief in the existence of *kami* and *hotoke* (ancestors, buddhas) and positive mental health with samples of junior and high school and college students. These publications, in combination with the aforementioned ethnographic works, reveal that the

study of the religion-health relationship can (and should) be applied to cultures outside of the United States, including Japan (see also Musick et al. 2000).

GOALS AND OBJECTIVES

The goals of this dissertation are to 1) add to the religion-health literature, 2) build upon what has been published on this topic in Japan, and 3) assess the applicability of new measures of religiosity in religion-health research in Japan. I aimed to achieve the first objective by applying appropriate theories and methods of research in a cultural context that varies from the U.S. to assess correlations between religious behaviors and beliefs and subjective and psychological well-being in Japan. Findings indicate that these theories and relationships apply beyond specific cultural settings. Religion can be linked to positive and negative well-being in non-Christian, non-Western societies.

To address the second goal, I conducted a series of focus groups and semi-structured in-depth interviews with Japanese to discuss their religious practices and beliefs and to explore means by which religiousness might be connected to well-being. Chapter 2 relies on the interview data to elaborate upon what Ohnuki-Tierney (1984), Kawano (2005), and Traphagan (2004) and others have found via similar research methods. Additionally, I used two survey datasets to examine these relationships quantitatively. By combining various methodologies and data and by looking at religiosity and well-being ties that have not been investigated previously in this region of the world, I wanted to add to the important research that a few other scholars have completed on Japan.

The last objective is addressed in Chapter 4. In 2007, I designed and administered a mail survey to 600 households in Kyôto Prefecture. Results from the 333 respondents indicate a need for religion measures that do a better job of reflecting the religious nature of Japan. The few surveys on Japanese society that include religion measures simply

translate directly questions that are commonly used in the U.S. and Europe. These measures tend to over-emphasize faith, religious attendance at places of worship, religious affiliation, and relationships with and beliefs in God (or gods). As mentioned, these do not capture the religious experience or consciousness for most Japanese. Thus, this survey included a number of new questions, and the comparatively higher frequencies indicate that these changes need to be added to ongoing large-scale surveys. In addition to higher response rates for the questions, Chapter 4 also presents several (mainly) negative correlations between religiousness and psychological distress. If such statistically significant associations appear with this small dataset of 269 respondents (after missing data are deleted), it is probable that larger samples would result in more relationships and stronger connections.

Religiosity is multidimensional and both a product of and a shaping force in society. By examining links between a number of religious dimensions and specifically tailoring the questions (of qualitative or quantitative research) to the society being researched, one will generate more accurate results in comparison to those who rely on data and measures that are contextually inappropriate.

DISSERTATION OVERVIEW

Chapter 1

The purpose of the first chapter is two-fold: 1) discuss *what* Japanese religiousness is and 2) add to this discourse by using new data to describe *who* has faith in a religion and *why*. First, I provide an explanation of religiousness in Japan to set the stage for the remainder of the dissertation. This section is meant to provide readers who are unfamiliar with Japanese religiosity with an understanding of some of the main characteristics. The second major objective is to supplement our understanding of Japanese religiousness by exploring correlates between "belief" (*shinkô*) in a religion and

socio-demographics, and I assess the strength of theoretical explanations for such devotion. Specifically, I test for connections between socialization and deprivation measures and self-reported belief in Buddhism, Christianity, and New Religions based on data from the 2000-2003 Japanese General Social Surveys (JGSS), a large national probability sample of Japanese adults.

Several conclusions are made. First, it is clear that few Japanese claim to believe in a religion. Although this finding is supported by most qualitative research, statistics from the Japanese Ministry of Internal Affairs and Communications indicate that almost all Japanese are religious adherents, and I discuss reasons for these conflicting findings. Second, results from multivariate analyses reveal that some deprivation measures (e.g., unemployment and low education and income levels) help explain affiliation with New Religions but not with Buddhist or Christian groups, and socialization controls (e.g., age and hobby group membership) predict belief in Buddhism and Christianity but not in New Religions. Furthermore, there are significant differences (and some overlap) between *personal* belief in each religious group and having a *household* religion.

Insufficient data has hindered research on this topic in the past. This study takes advantage of new resources, supports findings from qualitative research, and enables us to understand better *who* believe in a religion in Japan and *why* they might claim such affiliation.

Chapter 2

The purposes of this chapter are 1) to present theoretical explanations for relationships between religion and well-being in Japan and to 2) to use interview data as empirical support for these theories. Specifically, I examine relationships between household ritual participation and well-being. I argue that the theories of rational choice and religious coping help explain why Japanese turn to specific rituals in times of trouble.

I also suggest that the interpretation of Japanese religiosity as ultimately concerned with well-being provides an explanation for why rites and beliefs are associated with the *maintenance* of wellness.

Based on in-depth semi-structured interviews with 17 Japanese adults in the summer of 2007, I conclude that frequent household ritual involvement is connected with well-being in Japan because the rites 1) have become an important part of these individuals' *habituses*, 2) connect them to their ancestors and to *kami*, 3) provide them with a sense of being watched over and protected, and 4) bring them serenity. Rituals and belief systems in Japan also seem to generate a strong sense of gratitude towards one's ancestors and *kami*, and I discuss how this sentiment supersedes religious affiliation, beliefs, and the types or frequency of ritual involvement. The chapter concludes with a discussion of these claims and some comments concerning the need for further research.

Chapter 3

Using data from the 2000-2003 JGSS, the findings in Chapter 3 reveal that devotion to and affiliation with certain religions are positively and significantly correlated with a five-item index of life satisfaction and a single measure of happiness in Japan. Even after controlling for key socio-demographic variables such as age, gender, education, income, and other secular measures, it is apparent that, overall, "devotion" to a religion is positively associated with subjective well-being among Japanese adults. My analysis also indicates that there are different religious organizational effects on quality of life. Compared to Buddhist membership, Christian affiliation is more likely to be connected with life satisfaction and happiness, and New Religion membership is significantly correlated with happiness. In this chapter, I provide theoretical explanations for these associations, address the implications of the findings, and discuss the need for further research.

Chapter 4

The final chapter relies on data from the mail surveys I conducted in the summer of 2007 to examine correlations between several dimensions of religiousness and psychological distress among Japanese adults. I use a 10-item index from the Japanese CES-D Scale as the dependent variable to examine its associations with a 6-item religious coping index, household rituals, worldviews or beliefs, and religious identity. To explain these connections, I apply the theories of religious coping, activity theory, and worldviews, and I assess whether these explanations are applicable in the Japanese context. In general, results from multivariate analyses reveal 1) positive correlations between religious coping and psychological distress, 2) salubrious and pejorative ties between household ritual objects and mental health, 3) positive links between certain beliefs and distress, and 4) few statistical differences between religious identities and CES-D symptoms.

GENERAL REMARKS

A few general remarks are necessary to explain the style and format of this dissertation. Although the chapters are tied together under the broad theme of religion and well-being in Japan, they are written to be published as separate articles. Admittedly, this results in some redundancy. The substantive content of each chapter is different, however, and each offers a unique contribution to the literature on religion and well-being in general and, especially, in the Japanese context.

To date, there are very few studies that examine this important relationship in Japan. This dissertation offers theoretical and empirical support to reveal strong associations between various dimensions of Japanese religiousness and subjective and psychological well-being. Although it is not a comprehensive examination of religiousness and well-being in Japan, it is the only study that offers a review of the literature on

religion and health, an assessment of publications on this topic in Japan, and new analyses with data heretofore not applied to this type of research. For these reasons, it helps fill a substantial gap in the scientific study of religion and well-being.

Chapter 1: Religious Affiliation in Contemporary Japan

This chapter provides a description of some of the most common and important aspects of contemporary Japanese religiousness based on previous research. To enhance this discussion, I also address a topic that has received very little academic attention: religious affiliation in Japan. Quantitative accounts of religious affiliation range from more than one and a half times the total population to thirty percent or less, and we do not have a solid understanding of who these affiliates are. This chapter focuses on four core questions to provide a clearer portrayal of Japanese religious affiliation: 1) what is the approximate number of Japanese who claim religious affiliation, 2) how do the figures presented in this chapter differ from previous statistics and why, 3) are there significant differences between individual affiliates and those who claim to have a "household" religion, and 4) what are some of the theoretical explanations for religious affiliation in Japan?

Presently, there are no studies in English that use a national probability sample of Japanese to examine who claim religious affiliation. For the most part, lack of data and restricted access to individual-level data have inhibited such research. Moreover, because so few Japanese personally identify themselves as affiliates of one religion or another, sample sizes of different religions often are too small to run statistical analyses, and religious affiliation in Japan remains unclear and under-researched.

Another important question is *why* individuals acknowledge belief or membership in a specific religion. Most Japanese "New Religions"[1] and Christian denominations are exclusive in terms of affiliation, so it is possible to understand why their members identify themselves with these groups. Japanese Buddhist sects tend not to restrict

membership, however, and the complication lies in discerning who personally *claims* affiliation and who *is claimed* as a "Buddhist" by a Buddhist temple or sect. There are only a few studies that have addressed theoretical explanations for religious affiliation in Japan (see e.g., Davis 1983; Miller 1992b), and this chapter offers new findings based on methodologies and data not previously applied to this topic of research.

In this chapter, I address divergent findings between the Japanese government's reports of religious adherents and qualitative research on religious affiliates, and I use data from the Japanese General Social Surveys (JGSS) to examine characteristics of Japanese who claim to believe (*shinkô*) in Buddhism, New Religions, and Christianity. There are several ways to measure religious affiliation with JGSS data. One question asks respondents to select associations or organizations to which they belong, and "religious organizations or associations" (*shûkyô no dantai ya kai*) is one option. Another question asks, "Do you have a religion you believe in?" (*Shinkô shite iru shûkyô wa arimasu ka*). Answer categories are "yes", "I don't really believe [in one], but I have a household religion" (*toku ni shinkô site inai ga, ie no shûkyô wa aru*), and "no".[2]

Admittedly, the two questions are not identical. The former addresses membership in the traditional sense. The latter is also an important indicator of affiliation with a religion because by stating one's belief or faith in a religion, one is acknowledging an on-going or present connection with that religion. It does not mean formal membership or registration, but as I will argue, for many Japanese such membership is uncommon. Another advantage of the latter question over the former is that it includes a follow-up question that asks respondents who select 'yes' or 'household religion' to write in the name of the religion—not select from a list. To generate sample sizes of these religions that are substantial enough to examine statistically, I combined these responses into four major religion categories: Buddhism, New Religions, Christianity, and Other.[3]

With these data, I apply theoretically and empirically driven measures of socialization and deprivation to examine whether socio-demographics, social roles and attitudes, and poor well-being or low social status impact belief-based affiliation at different rates. This study's hypotheses concentrate on individual belief in a religion because this allows us to compare the findings here with prior reports of affiliation. Moreover, this measure implies present faith in a religion and tells us more about the individual's religiousness than the household religion measure. The latter measure is used to assess the extent to which these types of affiliation differ based on how respondents interpret their connection to a religious organization.

To address these topics, this chapter is divided into five core sections. First, I describe some of the main characteristics of religiousness in contemporary Japan, and I follow that with a discussion of some of the problems with studying Japanese religious affiliation and why different methodological approaches and data can reach nearly opposing conclusions. I then explain the theoretical considerations of this study and the hypotheses concerning the socialization and deprivation measures that drove my research concerning individual affiliation. That section is followed by an introduction to the study's data and measures, and the next section includes results of multinomial logistic regression analyses concerning the effects of these measures on three types of religious organizational affiliation (general, individual, and household). I conclude with a discussion of the findings, address some of the limitations of this study, and suggest some directions for future research.

RELIGIOUSNESS IN CONTEMPORARY JAPAN

For the most part, our knowledge of Japanese religiousness is limited to qualitative research. Long-term fieldwork and in-depth interviews have provided invaluable and convincing theoretical explanations for and detailed empirical examples of

religious behaviors and beliefs in Japan. Based on these sources, many argue that the most common characteristics of contemporary Japanese religiousness include 1) a focus on practices and rites over doctrines, theology, or meaning (Davis 1992; Kisala 2006; Reader 2001; Traphagan 2005), 2) concern for this-worldly benefits, particularly individual and collective well-being (Reader and Tanabe 1998; Traphagan 2004), 3) ancestor veneration (Klass 2005; Smith 1974), and 4) beliefs in the existence and efficacy of a pantheon of abstract *kami* (gods, deities, or spirits) and buddhas[4]. Japanese religiousness is a syncretistic blend of, mainly, Buddhist, Shintô, and folk traditions, practices, and beliefs. It is important to recognize, however, that despite the multitude of sacred beings, they are not the focus of attention for most Japanese. Often, religiousness is more about the *doing* and the *act* of worship than the meaning behind the rituals or the specific objects of veneration or consideration. Although there is an on-going debate concerning how scholars define the "religious" in Japan versus how Japanese do so (see e.g., Fitzgerald 2003a, b, 2004a, b; Reader 2004a, b), there is a wealth of literature on these main characteristics. On the other hand, we know much less about what it means to be a religious affiliate in contemporary Japan.

Compared to many other societies, few Japanese individuals report exclusive religious affiliation. It is not clear exactly what percentage of Japanese claim membership in Buddhist or Shintô sects, foreign-organized or indigenous Christian groups, or the dozens of Japanese New Religions that were formed during the past 150 years or so. Statistics from the Japanese Ministry of Internal Affairs and Communications indicate that almost all Japanese are religious "adherents". This contradicts the work of most ethnographers, however, who find that very few Japanese identify themselves as affiliates of one religion or another. Moreover, limited data and small numbers of religious affiliates has made it impossible to examine some of the effects of even basic socio-demographics,

such as gender, age, and the size of the city one lives in, on religious organizational affiliation.

Measuring Religious Affiliation in Japan: The Trouble with "Religion"

Most Japanese describe themselves as "*not* religious" (*mushûkyô* or *shûkyô wa nai*) to distinguish themselves from those who are members of religions that are exclusive or that focus on "personal faith" (Kawano 2005:36). These same people are not anti-religious or atheists, necessarily, since they tend to enact rituals that can be interpreted as "religious" and that are closely tied to cultural norms. Indeed, as in many cultures, it is often difficult to distinguish clearly between the sacred and the secular in Japanese culture (Martinez 2004). This label tells us more about what they are *not* rather than what they are (see also Ama 2005; Reader 1991; Traphagan 2004; Yanagawa 1991).

The syncretistic nature of Japanese religiousness also helps explain why exclusive religious affiliation is uncommon in Japan. As mentioned, for centuries religiousness in Japan has been characterized by a relatively seamless blend of Shintô, Buddhist, and local folk rituals and belief systems that makes it difficult for many to distinguish one religion from another (Miller 2000:7-8)—despite the fact that the government officially separated Shintô and Buddhism in the late 1800s. On the surface, it may be easy to identify a Shintô shrine or a Buddhist temple. Where the two differ in terms of daily influence or specific beliefs, though, is not well known nor is it particularly important for most Japanese. The religious dimension of knowledge (of doctrines or *kami* or buddhas) is not significant to many Japanese, in part because the historical interrelationship of these two major religions makes it imprecise and unnecessary.

In daily life, different religious traditions are used to mark important life cycle events, and it is not uncommon for a child to be purified at a Shintô shrine soon after its birth, later get married in a Christian church (Fisch 2001) and then be buried with a

Buddhist funeral ceremony (Reader 1991). Other important folk and Taoist traditions, such as ancestor veneration and special ceremonies during an individual's 'unlucky' years (*yakudoshi*), are also typical.

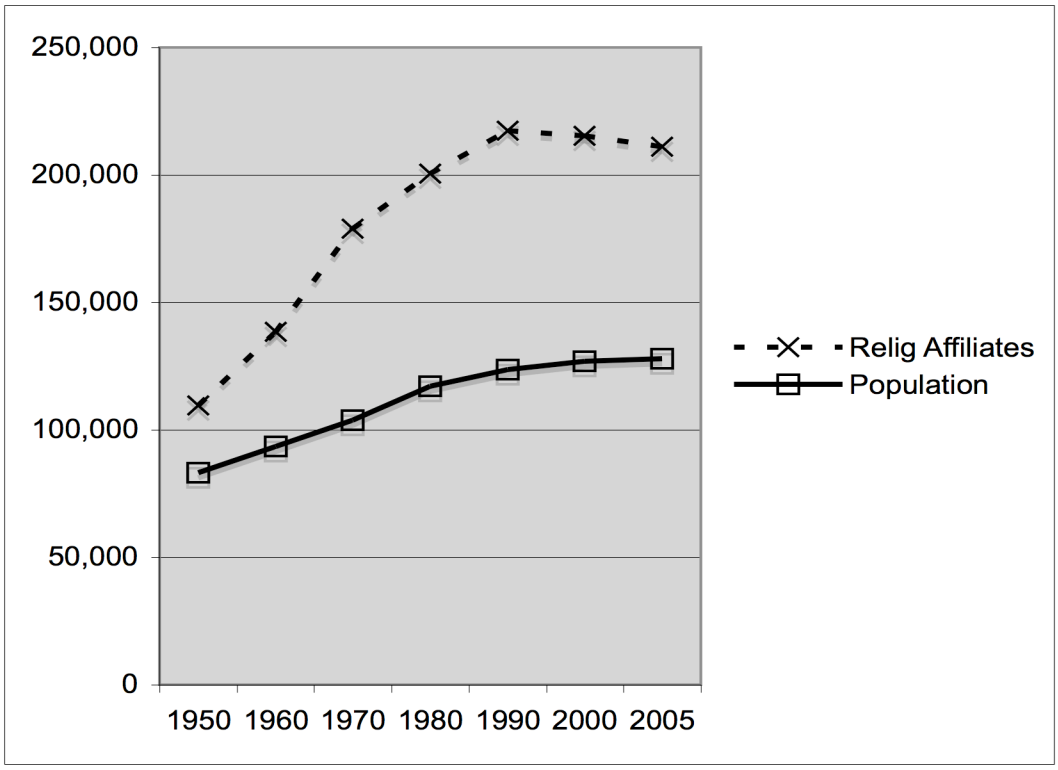
Another explanation for Japan's low rates of religious affiliation has to do with the word *shûkyô*. In the mid-1800s, government officials used "*shûkyô*" to refer to the Christian religions that were re-entering Japan for the first time in over 200 years (Isomae 2003), and it was first used to indicate teachings from different Buddhist schools (Ama 2005). Since its inception, *shûkyô* has implied organized religions and religious teachings—most recently Christian. Today, the term is still viewed negatively by many Japanese.[5] Christianity and more indigenous religions such as Shintô, Japanese Buddhism, New Religions and "new New Religions"[6] that have emerged since the late 1800s have all suffered from social stigmas in the past century because of their associations with repressive governments, excessive recruitment strategies, or social violence or because of their foreignness (see Tamaru and Reid 1996). For these reasons, many Japanese think of "*shûkyô*" as something to be feared ("*kowai shûkyô*", Ômura 1996).

But what do we know about those who *do* claim religious affiliation? Now that data is available to analyze several types of affiliation (i.e., individual and household) on a nationwide scale, in this chapter I try to clarify some of the misconceptions concerning religious affiliation in Japan and examine its connections with theoretical predictors.

Religious Affiliation in Japan: Quantitative Results Version I

According to annual reports by Japan's Ministry of Internal Affairs and Communication, except for 1952, Japan has had more religious adherents than its total population since the government began acquiring this data in 1948. As Figure 1.1 reveals, this divide increased substantially beginning in the 1970s, though the gap has been shrinking in recent years.

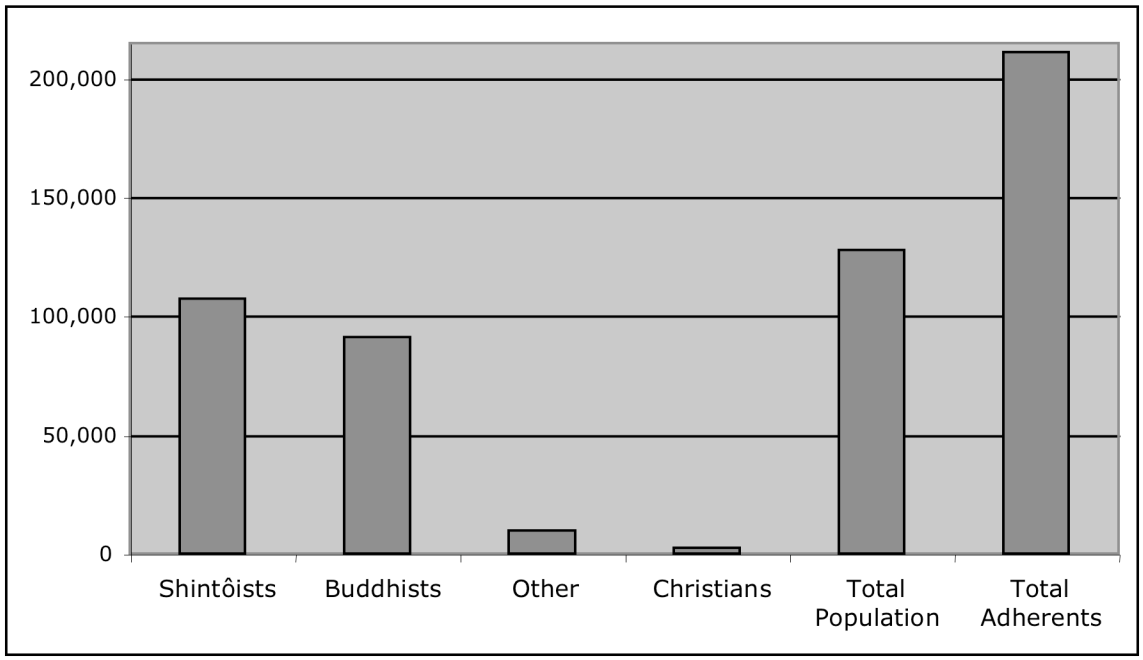
Figure 1.1: Religious Adherents in Japan (1950-2005)



Source: Statistics Bureau of Japan (2008)
Note: Y-axis in millions

Figure 1.2 (below) illustrates this phenomenon in greater detail and focuses on data from 2005. Here, approximately 107 million Japanese were Shintô adherents, over 91 million were Buddhists, 9,918,000 were labeled 'Other', and slightly more than 2.5 million were Christians for a total of 211,021,000 religious adherents (Statistics Bureau 2008:747). The population of Japan at the time, however, was only 127,768,000 (35). These data indicate that religious adherents made up more than 1.65 times the total population in 2005.

Figure 1.2: Religious Adherents in Japan (2005)



Source: Statistics Bureau of Japan (2008)
Note: Y-axis in millions

How is this possible, especially given the consistent findings of ethnographic researchers that so few Japanese claim to be religious members? In the past, scholars have explained this inconsistency by noting that most Japanese belong to more than one religion at a time (see e.g., Okada 1994; Stark, Hamberg, and Miller 2005). Although it is true that many conduct rituals of different religions over their life course, the problem with this explanation is that it is based on an understanding that Japanese *claim* religious adherence. As argued above, that is rarely the case. Perhaps a more accurate explanation is that these figures are reported by officially recognized religious institutions and not by Japanese individuals (cf. Kisala 2006).

Frequently, affiliation with a Buddhist temple or Shintô shrine is based on geography or heredity rather than on one's personal religious motivations (see Davis 1992; Traphagan 2004). Many are automatically included as members (*ujiko*) by their local Shintô shrine simply because they live within its district. Similarly, in the case of Buddhist temples, though a significant number of Japanese will state that they are affiliated with the temple where their ancestral tomb is located, most likely living household members did not chose this connection. Additionally, the figures reported by shrines and temples often include the same individuals or families more than once, because Japanese are free to make donations that may be recorded at a number of places of worship, regardless of the religion. Most likely, these individuals do not consider themselves affiliates of any religious institution, and they will visit different shrines and temples throughout the year on an as-needed basis (see Reader and Tanabe 1998). For these reasons we see why Shintô boasted 84 percent of the population and Buddhism claimed 71 percent in 2005.

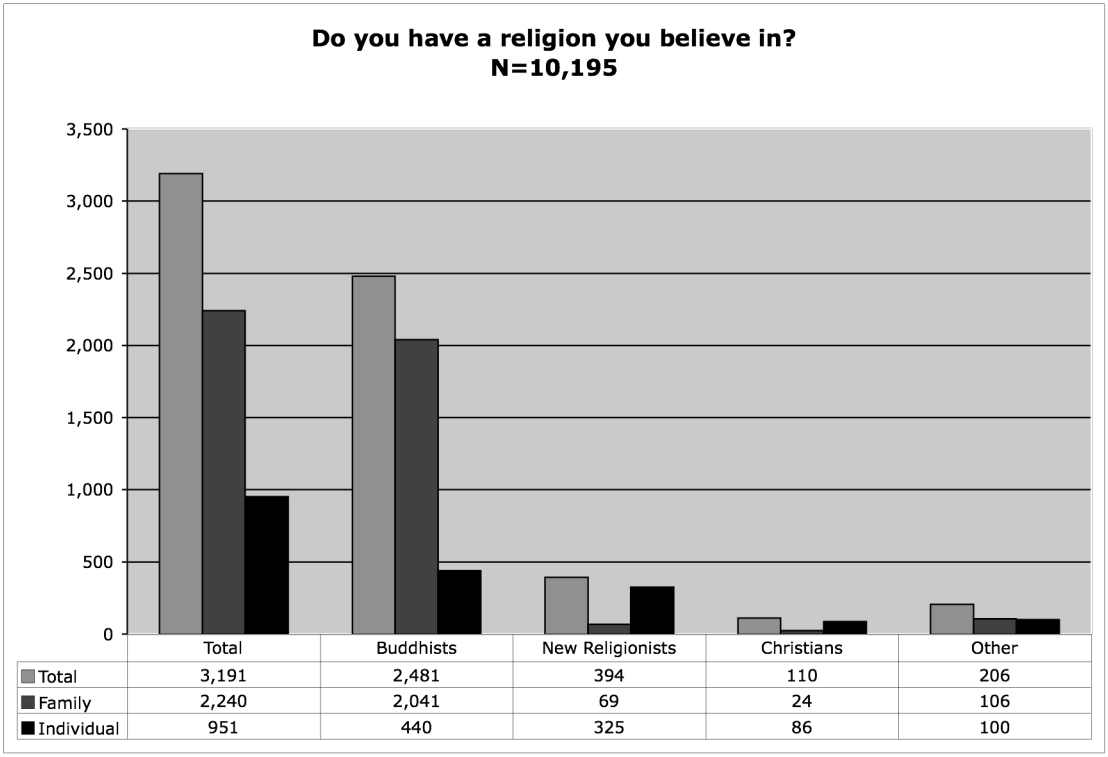
Religious Affiliation in Japan: Quantitative Results Version II

On the other extreme, I turn to data from the JGSS. Units of analysis and respondents are individuals. Additionally, the JGSS allows us to distinguish between household and individual religious affiliation, and these results closely reflect the findings of qualitative-based research. Because the JGSS includes individuals randomly sampled from across the country, these data provide a portrayal of religious affiliation in contemporary Japan that is more generalizable across socioeconomic status, gender, age, and geography. Also, by combining years of the JGSS, we get a larger sample size, allowing us to analyze some of the smaller subpopulations. Still, sample sizes of each religion or sect are too small to examine separately (for example, we cannot compare different New Religions) and must be added together for statistical analysis.

Consequently, we are making certain generalizations here by combining the various Buddhist, Christian, and New Religion organizations that respondents listed, and this must be taken into consideration when interpreting the findings.

Figure 1.3 displays the number of respondents in the 2000-2003 JGSS who claimed an individual or household religion. The first noteworthy statistic is that the combined total of respondents who listed an affiliation with one of the four major religious categories consists of 31.30 percent (n = 3,191) of the valid responses (N = 10,195). Buddhists make up a majority of these four religion categories with 2,481 (77.75%) respondents. Next, there are 394 New Religion members (12.35%[7]) and 110 Christians (3.45%), and 100 are categorized as "Other" (3.13%). This latter group includes 60 Shintôists (2.0%)—a stark contrast from the 85 percent reported by the Japanese government. It is also important to note that only 9.33 percent (n = 951) of the total sample claimed *individual* affiliation. Over 70 percent (n = 2,240) of those in the four religion categories claimed to have a household religion, and the models below suggest strongly that it is essential to distinguish between household and individual religiousness when asking questions about religious affiliation in Japan (see also Nakamura 1997). The majority of the total sample (66.93%; 7,004 out of 10,464) maintained that they do not have a religion they believe in, household or individual, and these results better reflect the findings of qualitative studies.

Figure 1.3: Religious Affiliation in Japan (2000-2003 JGSS)



	Total	Buddhists	New Religionists	Christians	Other
Total	3,191	2,481	394	110	206
Family	2,240	2,041	69	24	106
Individual	951	440	325	86	100

THEORETICAL CONSIDERATIONS AND RESEARCH HYPOTHESES

Socialization Theory and Japanese Religious Affiliation

One commonly cited explanation for religious involvement falls under the rubric of socialization. These influencers are highly contextual and are deeply influenced by one's culture (Arnett 1995), and they include one's upbringing, social and familial roles or statuses, and "value-orientations," for instance (Parsons 1964; see also Beeghley, Bock, and Cochran 1990). In Japan, social pressures tend towards conformity to traditional or common roles and attitudes, and religious responsibilities often are gendered. For example, women are most commonly in charge of household rites (Martinez 2004) and men most often play the lead roles in public community festivals (Roemer 2007).

Concerning affiliation in established religions, women are much more likely than men to claim affiliation with New Religions or with Christianity. In both organizations, women most frequently make up the majority of the laity. In many New Religions, women's roles such as proselytizing (Usui 2003), healing, and other "active and powerful positions" (Hardacre 1993:295) are seen as invaluable. Women in Christian churches, however, rarely enjoy such powerful positions (Yamaguchi 2003). Though few women serve at the altar or in decision-making capacities, there are more women than men in the pews.

Japanese Buddhism, on the other hand, maintains certain traditional doctrine-based prejudices against women, such as the "five impediments" that prevent women from attaining Buddhahood (Nakamura 1997:88; see also Hardacre 1993; Ruch 2002). Though official views on this have changed in recent centuries, actual practices still restrict women's roles in many lay Buddhist settings (Kawahashi 2003; Mori 2003). There appears to be little reason for women to join Buddhist sects at the same rate as they have joined New Religions and Christianity in recent decades. Taken together, these examples suggest that socialization processes within certain religious institutions are likely to explain gendered differences for religious affiliation, and they led me to my first hypothesis:

Hypothesis 1: *Compared to those who are not affiliated with a religion, women will be significantly more likely than men to believe personally in Christianity and New Religions but not more likely to express personal faith in Buddhism.*

Social forces may also help explain age discrepancies. Of the three religions studied here, Buddhist customs, philosophies, and doctrines are the most traditional and may, therefore, be more appealing to older individuals. Another explanation for why older Japanese would be more likely to claim belief in Buddhism but not in Christianity or New

Religions has to do with socially constructed interpretations of Buddhism and their roles within the household. For many Japanese, Buddhism is closely connected with ancestor veneration. In fact, informants from Stewart Guthrie's ethnographic study in the 1980s equated Buddhism with "praying to the dead" (1988:65). In general, the oldest family members (especially women) are most frequently responsible for conducting rites for household ancestors (Kawano 2005; Martinez 2004; Traphagan 2003, 2004), and these connections between 1) the key roles of the elderly in ancestor veneration and 2) these rituals and Buddhism help explain why older Japanese would be more likely than their younger peers to claim Buddhist affiliation. Socially defined roles in New Religions and Christianity are not as likely to be carried out predominantly by older members. These various arguments suggest the following hypothesis:

Hypothesis 2: Age will be positively and significantly correlated with belief in Buddhism but not with New Religions or Christianity, compared to religious non-affiliates.

Beyond these demographic socialization measures, this paper also examines the effects of other forms of social engagement. For instance, some people appear to be 'joiners' and are involved in a number of organizations (Regnerus and Smith 2005). Within the Japanese context, this could be explained in part by the concept of *ikigai*. Fundamentally, *ikigai* is active participation in one or more activities with others. It is a "social commitment" (Matthews 1996:45), and although such emphasis on social participation is not unique to Japan (see e.g., Erikson, Erikson, and Kivnik 1986), there is a general awareness that to be a healthy citizen, one must be involved in society, and this is particularly the case for Japanese elderly (Traphagan 2004). For this reason, the models in this study include measures for whether one is a member of one or more hobby groups and whether one meets or dines with friends at least once a week. Perhaps by controlling for these other secular social acts, we can explain why Japanese claim faith in the more

exclusive groups that place greater emphasis on individual religiousness or spirituality, such as New Religions or Christianity. The above arguments suggest the following hypothesis:

Hypothesis 3: New religion and Christian affiliates are more likely than non-affiliates to socialization frequently with friends and be involved in hobby groups.

One other socialization control I include measures traditional attitudes towards burial preferences. Specifically, I anticipated that a desire to be buried within one's family plot (or that of one's husband) is likely to be much more important for Buddhists than for those who believe in newer or Western-influenced religions. Thus, I concluded:

Hypothesis 4: Buddhist affiliates are more likely than non-affiliates to prefer to be buried at their family gravesites.

Deprivation Theory and Japanese Religious Affiliation

In Glock's and Stark's (1965) seminal work on religion and society, they described five types of deprivation that help explain why individuals join religions, especially new religions. According to this theory, people who are suffering in some mental, physical, or social manner look to religion for various forms of compensation. Although the authors admitted that their rationalization was "imprecise and provisional" (259), many have developed upon this theory, and some maintain that it is a helpful tool in exploring religious membership in general (see Stark and Bainbridge 1985).

On the other hand, based on data from the 1971 National Council of Churches in the United States and Canada, Hoge and Polk (1980) concluded that both objective (e.g., education, income, and race) and subjective (e.g., Purpose-in-Life index, life satisfaction) measures of deprivation failed to explain church participation or commitment. Roof and Hoge (1980) reached similar conclusions regarding religious involvement using the

Unchurched Americans survey. Both these studies focused on mainline Protestant participation, however, and they are limited to the U.S. and Canada.

The extent to which deprivation theory may help explain belief in a religion in Japan remains under-researched. Sociologist Alan Miller found partial support for this theory in Japan based on data from the 1977 Survey of Japanese Values and Behaviors. Findings from his multivariate analyses indicated that poverty was significantly associated with increased prayer and chronic illness was related with beliefs in a world hereafter and in reincarnation (1992a:213). Several qualitative studies also indicate the relevance of this theoretical model. In Guthrie's (1988) study of a New Religion in a mountain hamlet, almost all of his informants explained that one of the reasons—if not the only reason—they joined the religion was because of poor health. Similarly, Kyôko Nakamura found that "sickness" was the second most common reason in her sample for joining the Risshô Kôseikai New Religion and the fifth most common reason for joining among her sample of Episcopalians (1997:95). She maintains that this is a major reason for membership in all religions in Japan, and she explains, "It is, indeed, natural for people facing physical or mental crises to seek help from religion as well as from medical treatment" (96). More so than Japanese Buddhism, many new and Christian religions in Japan involve regular 'healing' practices (see Davis 1980; Guthrie 1988; Hardacre 1984; Mullins 1998). Other reasons for joining religions in Japan include the need for more or improved social relations (especially family relationships), general "discontent" with one or more aspects of life (Guthrie 1988:186), and pressures from close relatives (Hardacre 1984; Nakamura 1997; Usui 2003).

To test this hypothesis in the Japanese context, I included four main measures of deprivation. Two are subjective (Low class and Poor health) and the other two are objective (whether the respondent has experienced one or more traumas in the past five

years and whether he or she is unemployed). Based on the above research, I derived the following hypotheses:

Hypothesis 5: In comparison to non-affiliates, New Religion affiliates are more likely to report lower class status, poor health, unemployment, and having experienced one or more traumas.

Hypothesis 6: Christian affiliates are more likely than non-affiliates to claim poor health and the experience of one or more traumas.

DATA AND MEASURES

The analyses presented here rely on the Japanese General Social Surveys (JGSS), omnibus surveys that use multistage probability sampling procedures to obtain national samples of approximately 3,000 adult respondents each year. Population stratification is based on six major regions and the size of the cities/districts. Surveys are administered using both face-to-face interviews and self-administered questionnaires. For this study, I combined four years of cross-sectional data (2000-2003), and the valid responses for each year are: 2000 (N = 2,893), 2001 (N = 2,790), 2002 (N = 2,953), and 2003 (N = 3,663), for a total of 12,299. Response rates are: 2000 (64.9%), 2001 (62.4%), 2002 (62.2%), 2003 (51.5%).[8]

Table 1.1 illustrates the main variables included in the analyses. Socio-demographic controls are Sex (female = 1), Age (in years), Education (in years [6-16])[9], and Household income (continuous imputed in about $10,000s—converted from Yen; US$1 = ¥110). These models also include dummy variables for whether or not respondents are married (1 = married; 0 = not married, divorced, or widowed) and whether they live in urban or rural areas (1 = largest cities/other cities; 0 = town/village). Except for income, missing values were deleted using list-wise deletion.[10]

Table 1.1: Variable Descriptions and Descriptive Statistics (2000-2003 JGSS).

Variable	Descriptions	N	Mean or %
Socio-demographics			
Sex	Female index variable (1=female, 0=male)	12,299	54.80%
Age	Age in years	12,299	52.00
Education	Last school attended (in years, 6-16)	12,213	11.96
Household income	0-19 (US$0-200,000 or more)	12,299	9.71
Marital status	Married=1, 0=not married, divorced, or widowed	12,299	73.54%
Urban	Large cities/other cities=1; town/village=0	12,299	75.58%
Socialization			
Hobbies	Member of hobby group (1=yes)	11,877	15.69%
Social	Visit with friends at least once/week (1=yes)	10,509	7.54%
Family grave	Prefer to be buried in family grave (1=yes)	9,462	24.56%
Deprivation			
Low class	Low or lower middle=1, 0=middle and up	12,144	40.08%
Poor health	Poor health=1, 0=satisfactory to good	12,299	20.16%
Traumas	One or more traumas=1, 0=none	12,251	24.58%
Unemployed	Unemployed=1; 0=other status	12,146	2.10%
Religious Affiliation			
None	1 = yes (Reference category)	10,464	66.93%
Household	1 = yes	10,464	22.86%
Buddhist	1 = yes	10,195	20.02%
New Religion	1 = yes	10,195	0.68%
Christian	1 = yes	10,195	0.24%
Other	1 = yes	10,195	1.04%
None	1 = yes (Reference category)	10,195	78.03%
Individual	1 = yes	10,464	10.21%
Buddhist	1 = yes	10,195	4.32%
New Religion	1 = yes	10,195	3.19%
Christian	1 = yes	10,195	0.84%
Other	1 = yes	10,195	0.98%
None	1 = yes (Reference category)	10,195	90.67%
Year controls			
Year 2000	Control for wave 2000	12,299	23.52%
Year 2001	Control for wave 2001	12,299	22.68%
Year 2002	Control for wave 2002	12,299	24.01%
Year 2003	Control for wave 2003 (Reference category)	12,299	29.78%

Predictor variables to test the theory of socialization include whether or not respondents are members of one or more hobby groups (Hobbies), whether they visit with friends at least once per week (Social), and whether they prefer to be buried in a family grave. These socialization controls are dichotomous (1 = yes).

To measure the effects of deprivation on religious affiliation, I included two subjective dummied controls: one for Low class (1 is low or lower-middle class; 0 is middle, lower-upper, and upper class) and one for self-reported Poor health (1 = 1 or 2 on a scale of 5; 0 = 3-5). These analyses also measured whether respondents had experienced one or more traumatic events in the past five years (Traumas; 1 = one or more; 0 = none), such as "divorce, unemployment, hospitalization, disabilities, death of someone close to you," and whether or not the respondent is Unemployed (1 = unemployed; 0 = working, retired, a student, a housewife/husband, or other).

As previously explained, religious affiliation is measured by self-reported "belief" (*shinkô*) in a religion, and this analysis focuses on non-causal predictors of individual and household belief in Buddhism, New Religions, and Christianity. There are too few Shintôists to include them separately in the models. As Table 1.1 indicates, overall religious affiliation is low. Out of 10,464 valid responses, 7,004 (66.93%) reported having no religion they believe in, 2,392 (22.86%) have a household religion but do not practice it personally, and only 1,068 (10.21%) respondents claimed personal belief in a religion. Of the household religions, 2,041 (20.02%) were Buddhist, 69 (0.68%) were New Religion affiliates, 24 (0.24%) were Christians, and 106 (1.04%) were categorized as Other. Concerning individual religious affiliation, 440 (4.32%) wrote that they believe in "Buddhism" (*bukkyô*) or a Buddhist sect, 325 (3.19%) reported faith in a New Religion, 86 (0.84%) were Christians, and 100 (0.98%) fell into the Other category.

Admittedly, there are certain limitations to this measure of religious affiliation. For example, some individuals may have reported faith in Buddhism when they are members of a New Religion. Many New Religions have their roots in Buddhism and still maintain close ties with their "mother" religion. This may explain why a majority of the respondents claimed belief in Buddhism (individual and household).

Another possible confounding factor is that, for many, Buddhism is "not a religion" (Chang and Dong-Shick 2005:156; see also Groth-Marnat 1992) but a "philosophy" (Snodgrass 2003), and others—in particular those whose household religion is Buddhism—may see its associated practices (such ancestor veneration) as "traditions", "customs", or "values" (Fitzgerald 2003b; Ômura 1996). As previously mentioned, many Japanese say they are registered members of a temple (*danka*) because that is where their family gravesites are located. This does not, however, automatically mean they see Buddhism as an individual faith or even their household "*religion*". It is possible, therefore, that using the word "religion" (*shûkyô*) kept some respondents from answering this question affirmatively.[11] Regardless of these speculations, a sufficient number of respondents did interpret the question similarly, and for the first time these data allow us to examine correlates of religious affiliation that can be generalized across regions, ages, gender, and other important measures. Moreover, the findings here reveal significant differences per religion, indicating that most responded in the same way and supporting the need for this type of research.

MULTIVARIATE ANALYSIS: MODELING RELIGIOUS AFFILIATION

To explore the effects of socio-demographic and theoretical correlates of religious affiliation, I constructed three mutually exclusive unordered, categorical variables:
1) General Affiliation (includes individual, household, and no affiliation), 2) Individual Affiliation (includes Buddhist, New Religion, Christian, and Other), and 3) Household

Affiliation (includes Buddhist, New Religion, Christian, and Other). I employed multinomial logistic regression to predict respondents' affiliation with each type in comparison to non-affiliates (the reference category). All models include standardized weights and controls for each year (2003 is the reference year), and odds ratios and standard errors are reported. It is important to remember that all Buddhist sects, Christian groups, New Religions, and those categorized as Other are combined accordingly, so we are making certain generalizations here. Subpopulations for each religion category are simply too small to examine case specific relationships. Also, because the data are cross-sectional, I do not claim causation here—only associations. Nonetheless, this is the first study of its kind and, based on the theoretical explanations and empirical examples above, initial findings warrant our attention.

Comparing Individual, Household, and No Affiliation

The models in Table 1.2 compare the three general types of affiliation: individual, household, and none. The first model (Individual) illustrates multinomial regression odds ratios for individual belief in a religion, and we see that compared to those who claim *no* religious affiliation, women are 31 percent more likely than men to claim faith in a religion (OR = 1.31, $p < .001$), net of the controls. Age (OR = 1.03, $p < .001$) and Education (OR = 1.04, $p = .034$) and those who participate in hobby groups (OR = 1.34, $p = .003$), those who wish to be buried in a family grave (OR = 1.22, $p = .047$), and the unemployed (OR = 1.69, $p = .016$) are also highly likely to report individual affiliation. Household income is negatively associated, indicating that with each unit increase in income, respondents are 3 percent less likely than non-affiliates to believe personally in a religion (OR = .97, $p = .022$).

Table 1.2: Multinomial Regression Odds Ratios of General Religious Affiliation.

	Individual	Household
Sex (Female=1)	1.31***	.88**
	(.07)	(.05)
Age	1.03***	1.04***
	(.00)	(.00)
Education	1.04*	1.08***
	(.02)	(.01)
Income	.97*	1.03***
	(.01)	(.01)
Income miss	.86	.92
	(.08)	(.06)
Marital status	.90	.91
	(.08)	(.06)
Urban	.98	.75***
	(.09)	(.06)
Hobbies	1.34**	1.69***
	(.10)	(.07)
Social	1.27	.81*
	(.12)	(.11)
Family grave	1.22*	1.31***
	(.10)	(.07)
Low class	.98	.92
	(.08)	(.06)
Traumas	1.06	1.09
	(.08)	(.06)
Unemployed	1.69*	1.12
	(.22)	(.19)
Poor health	1.03	1.14*
	(.09)	(.06)
Year 2000[a]	.82	1.20*
	(.12)	(.09)
Year 2001	.87	1.16
	(.12)	(.09)
Year 2002	.83	.92
	(.11)	(.08)
Intercept	.02***	.02***
	(.34)	(.25)

Table 1.2 Notes: N = 9,914.83 (weighted total sample)
Max-rescaled R^2 = .109
-2 Log Likelihood = 15,045.83
*p<.05, **p<.01, ***p<.001 (two-tailed test)
Odds ratio (standard error in parentheses)
[a] Significance differences per year are likely a result of combining multiple waves of cross-sectional data. It is not expected that these differences cause significant bias and alter the findings (2003 is the reference year).

The second model (Household) reveals that compared to non-affiliates and controlling for the other measures, there is a noteworthy gender difference between individual and household affiliation. Women are 12 percent less likely than men to report having a household religion (OR = .88, p = .013). This is not surprising given that household religions tend to be patrilineal. Those who claimed a household religion are also much less likely than non-affiliates to live in urban areas (OR = .75, p < .001) and less likely meet to with friends frequently (OR = .81, p = .043). Positive predictors of this outcome include Age (OR = 1.04, p < .001), number of years in school (OR = 1.08, p < .001), Household income (OR = 1.03, p < .001), belonging to a hobby group (OR = 1.69, p < .001), preference to be buried in a family grave (OR = 1.31, p < .001), and Poor health (OR = 1.14, p = .049). The only overlaps between individual and household affiliation are Age, Education, Hobbies, and Family grave. Overall, these findings provide strong support for distinguishing between individual and household affiliates in this type of study.

Predictors of Individual Religious Affiliation

The next table (1.3) displays non-causal predictors of individual affiliation with the four main religion categories. To conserve space, only variables that are significantly correlated in one or more model are shown, but all models include the same controls from Table 1.2.

Table 1.3: Multinomial Regression Odds Ratios of *Individual* Buddhist, New Religion, Christian, and Other Affiliation.

	Buddhist	New Religion	Christian 1	Christian 2	Other
Sex (Female=1)	.98	1.58***	3.52***	2.49***	1.46
	(.12)	(.13)	(.27)	(.28)	(.23)
Age	1.05***	1.00	1.02**	1.02**	1.03***
	(.00)	(.00)	(.01)	(.01)	(.01)
Education	1.05+	.90***	1.27***	1.24***	1.07
	(.02)	(.03)	(.06)	(.06)	(.05)
Income	.98	.95*	1.05	1.05	.93+
	(.02)	(.02)	(.04)	(.04)	(.04)
Income miss	1.03	.63***	.80	.80	.52*
	(.12)	(.14)	(.26)	(.26)	(.28)
Urban	.73**	1.58**	.81	.81	1.26
	(.12)	(.17)	(.28)	(.28)	(.29)
Hobbies	1.42**	1.08	1.87*	1.95*	.54+
	(.14)	(.17)	(.26)	(.26)	(.36)
Social	1.00	1.40+	1.82+	1.81+	1.08
	(.22)	(.20)	(.34)	(.34)	(.41)
Family grave	1.72***	.86	.64	.65	.97
	(.15)	(.17)	(.32)	(.32)	(.32)
Unemployed	.98	1.91*	1.82	1.78	1.76
	(.44)	(.32)	(.76)	(.76)	(.60)
Year 2000	.90	.83	.47*	.47*	.37**
	(.20)	(.20)	(.36)	(.36)	(.35)
Year 2001	.80	.91	.97	.95	.49*
	(.21)	(.20)	(.31)	(.31)	(.33)
Year 2002	1.02	.95	.41**	.49**	.29***
	(.17)	(.18)	(.33)	(.33)	(.31)
Intercept	.00***	.11***	.38***	.00***	.00***
	(.52)	(.57)	(1.14)	(1.10)	(1.01)
Female x Education	--	--	--	1.28**	--
				(.10)	
Max-rescaled R^2	.087	.087	.087	.089	.087
-2 Log Likelihood	7,186.74	7,186.74	7,186.74	7,174.12	7,186.74

Notes: Models include controls for marital status, low class, traumas, and poor health.
N = 9,689.96 (weighted total sample)
+p<.10, *p<.05, **p<.01, ***p<.001 (two-tailed test)
Odds ratio (standard error in parentheses)

The first model (Buddhist) in Table 1.3 demonstrates that, consistent with Hypotheses 1 and 2, gender is not significantly associated with Buddhist affiliation, though there is a robust connection with Age (OR = 1.05, $p < .001$), even with controls for potentially confounding effects of other socio-demographic and theoretical predictors.[12] Model 1 also indicates that education and place of residence are correlated with belief in Buddhism. With each increase in years of education, Japanese are five percent more likely to believe in Buddhism (OR = 1.05, $p = .063$), and those from urban areas are 27 percent *less* likely than those in towns or villages to claim Buddhist affiliation (OR = .73, $p = .010$), net of the other controls. Although Education is weakly associated, the urban-rural divide is robust.[13]

Model 1 also tests for other socialization controls, and, unexpectedly, we see that those who participate in at least one group hobby are approximately 42 percent more likely than those who are not involved in such groups to believe in Buddhism (OR = 1.42, $p = .010$). These individuals are involved in several group activities, perhaps to fulfill their social duty to be engaged (*ikigai*). More predictably, preference for family burials is highly correlated with Buddhist affiliation (OR = 1.72, $p < .001$), supporting the traditional socialization Hypothesis (4). Unsurprisingly, none of the deprivation measures predict Buddhist affiliation in comparison to no affiliation.

The second model focuses on predictors of New Religion affiliation. Results support Hypotheses 1 and 2 and provide partial support for 3 and 5. For example, compared to non-affiliates, women are 58 percent more likely than men to claim belief in a New Religion (OR = 1.58, $p < .001$), net of the controls. Also as anticipated, Age is not associated with individual belief in New Religions.

Several interesting findings that can be explained, in part, by deprivation theory are the negative correlations between New Religions and education and income and the

positive association with unemployment. These findings indicate that for every unit increase in years of Education, Japanese are ten percent less likely to report affiliation with a New Religion (OR = .90, p < .001). Additionally, with each unit increase in Household income, respondents are five percent less likely to believe in a New Religion (OR = .95, p = .022),[14] and the unemployed are close to two times as likely as others to claim this affiliation (OR = 1.91, p = .043). Based on qualitative studies, this is not surprising (see Hardacre 1984; Nakamura 1997), and these results suggest support for the deprivation theory because it is the less educated, lower income, and unemployed individuals who appear to be more likely to affiliate with Japanese New Religions.

Another noteworthy result is the positive connection between urban living and this outcome (OR = 1.58, p = .007). New Religions often are based in urban areas, so this connection is not surprising. New Religion affiliates in these data are approximately 58 percent more likely than non-affiliates to live in urban areas than in towns or villages, and these results from a nationwide probability sample provide support for more localized qualitative research (cf. Hardacre 1984; Ishii 1996).

Unlike Buddhist affiliation, the overall results from this model provide *partial* support for both deprivation and socialization theories. A number of studies have shown that many New Religion members join because they are seeking improved health or social status or because they have suffered a traumatic event and seek guidance or support from these religions. As this model indicates, poor health, low class, and traumatic experiences are not convincing predictors of New Religion affiliation in general. Overall, these findings support both deprivation and socialization theories to an extent and they coincide with case studies of New Religions throughout Japan, as well as research on cults and similar groups in the U.S. (cf. Stark and Bainbridge 1985).

The next two models display correlates with individual Christian affiliation. In several respects, predictors of this category are similar to those of Buddhism. For instance, results partially support the socialization theory (see Hypothesis 3) and none of the deprivation measures are significantly associated with individual Christian affiliation (contrary to Hypothesis 6). Similar to Buddhist affiliates, Christians in this sample are 87 to 95 percent more likely than non-affiliates to belong to hobby groups ("Christian 1"—OR = 1.87, p = .015; "Christian 2"—OR = 1.95, p = .021), all else being equal. Additionally, these findings coincide with Hypotheses 1 and 4: both sex (female) and education are significantly associated for these individuals. In fact, compared to non-affiliates, women are 3.52 times more likely than men to believe in a Christian religion ($p < .001$), and for each unit increase in Education Japanese adults are 1.27 times more likely to report individual belief in Christianity ($p < .001$).

To augment this discussion, I added an interaction term between the Sex and Education variables in the fourth model (Christian 2).[15] I anticipated that as the value of education units increased the effect size of female would also rise, and this is the case (OR = 1.28, p = .014), given that the other variables are held constant. This indicates that the effect of gender on individual Christian affiliation depends on the level of education and visa versa. Even with the inclusion of this cross-product and the deprivation controls, the main effects of female and education remain positive and significant in "Christian 2". This interaction is not significant with faith in Buddhism or New Religions.

Like belief in Buddhist religions, Age is also positively correlated with personal belief in Christian religions (OR = 1.02, p = .008); though, this relationship is clearer for Buddhists. One interpretation is that younger respondents have not heard much about or become interested in Christianity. In her study of Episcopalians in Japan, Nakamura discovered the opposite—approximately 60 percent of her sample joined the church

before they were 20 years old (1997:93). She explains this as a result of the fact that most became members while they were attending Christian-run elementary, middle, and high schools and universities. Nakamura also notes a sudden growth among females in their seventies, indicating a curvilinear relationship for women, at least. She attributes this to the fact that these women are likely seeking comfort after the loss of their husbands and that they find solace in the church (94), and this provides one explanation for this study's finding.

Although the results here concerning gender, education levels, and socialization coincide with previous studies, it is not yet clear why age is correlated. One contribution of this paper is that findings support prior research and help reveal gaps in the literature that require further attention.

The last column (Other) is the most difficult to interpret because it includes a mix of different kinds of religious traditions. I retained it in the table for comparative purposes, and we see that Age (OR = 1.03, $p < .001$) is the only strong statistical predictor and Income (OR = .93, $p = .079$) and Hobby (OR = .54, $p = .089$) are weakly associated. The fact that Shintô and "ancestor worship" are included in this category most likely helps explain the age connection.

Predictors of Household Religious Affiliation

Table 1.4 displays predictors of *household* Buddhist, New Religion, Christian, and Other affiliation. Again, only variables that are significantly correlated with one or more religion category are displayed, though models included the same controls as in Tables 1.2 and 1.3. As revealed here, there are important distinctions and parallels between household and individual affiliation that deserve our attention. For instance, the first model (Buddhist) shows that compared to non-affiliates, women are 15 percent less likely than men to acknowledge Buddhism as their household religion (OR = .85, p =

.005). This is the opposite if what we found for individual Buddhist affiliation, and given that household religious ties are typically patrilineal, this is not surprising. Household Buddhists are also different from personal affiliates in that, in contrast to non-affiliates, they are more likely to have higher levels of income (OR = 1.05, $p < .001$), to have experienced one or more traumas in the past five years (OR = 1.11, $p = .071$), and to report poor health (OR = 1.16, $p = .024$), and they are less likely to be social (OR = .79, $p = .033$). There are several important similarities, however. In comparison with non-affiliates, both individual and household Buddhists are more likely to be older (OR = 1.04, $p < .001$), more educated (OR = 1.08, $p < .001$), live in rural areas (OR = .70, $p < .001$), participate in hobby groups (OR = 1.52, $p < .001$), and prefer a family grave burial (OR = 1.23, $p = .004$).

Table 1.4: Multinomial Regression Odds Ratios of *Household* Buddhist, New Religion, Christian, and Other Affiliation.

	Buddhist	New Religion	Christian	Other
Sex (Female=1)	.85**	.80	.89	.80
	(.06)	(.25)	(.40)	(.23)
Age	1.04***	.98**	.95**	1.06***
	(.00)	(.01)	(.02)	(.01)
Education	1.08***	.88*	1.33**	1.10*
	(.01)	(.06)	(.11)	(.05)
Income	1.05***	1.00	1.00	1.02
	(.01)	(.04)	(.07)	(.04)
Income miss	.90+	.86	1.08	1.13
	(.06)	(.27)	(.43)	(.24)
Urban	.70***	1.59	7.89	.83
	(.06)	(.35)	(1.29)	(.26)
Hobbies	1.52***	2.67***	7.11***	1.00
	(.07)	(.30)	(.42)	(.31)
Social	.79*	.76	1.34	.50
	(.11)	(.48)	(.57)	(.57)
Family grave	1.23**	1.83+	.64	1.21
	(.07)	(.36)	(.59)	(.28)
Traumas	1.11+	1.26	1.24	.76
	(.06)	(.26)	(.41)	(.26)
Unemployed	.97	2.33	6.30**	.65
	(.21)	(.58)	(.75)	(1.01)
Poor Health	1.16*	1.09	1.02	.88
	(.07)	(.31)	(.55)	(.27)
Year 2000[a]	1.28*	.93	1.22	1.31
	(.10)	(.44)	(.61)	(.37)
Year 2001	1.20+	.62	.87	1.00
	(.10)	(.47)	(.65)	(.38)
Intercept	.01***	.08***	.00***	.00***
	(.26)	(1.13)	(2.30)	(1.04)

Notes: Models include controls for marital status, low class, traumas, and Year 2002.
N = 9,689.96 (weighted total sample)
Max-rescaled R^2 = .109
-2 Log Likelihood = 10,629.40
+p<.10, *p<.05, **p<.01, ***p<.001 (two-tailed test)
Odds ratio (standard error in parentheses)

It is plausible that these findings are, in part, attributable to different sample sizes. More than 2,000 respondents claimed Buddhism as a household religion, whereas only 440 claimed to believe personally in Buddhism. This comparatively smaller sample may have weakened the statistical power of these variables in the individual affiliation model.

Concerning New Religion affiliation, the only similarity between individual believers and household religion is that both are highly likely to be less educated (OR = .88, p = .027) compared to non-affiliates and net of the other controls. Unlike individual affiliates, this small sample of New Religion household affiliates (n = 69) is correlated negatively with Age (OR = .98, p = .012) and positively with Hobbies (OR = 2.67, p = .001) and Family grave (OR = 1.83, p = .089).

Tables 1.3 and 1.4 also reveal some noteworthy distinctions between household and individual Christians. First, model 3 ("Christian") in Table 1.4 demonstrates that in comparison with non-affiliates, gender is not a strong predictor of household Christian affiliation, yet Table 1.3 reveals that women are 3.52 percent more likely than men to report individual affiliation. Also contrary to individual affiliation, respondents who claimed Christianity as a household religion are more likely than non-affiliates to be younger (OR = .95, p = .008) and to be unemployed (OR = 6.30, p = .014). The two types overlap concerning Education (OR = 1.33, p = .009) and Hobbies (OR = 7.11, p < .001). Again, sample sizes may explain these statistical differences to an extent. Twenty-four respondents claimed Christianity as a household religion, though 86 individuals reported personal belief.

DISCUSSION AND FUTURE DIRECTIONS

The primary objectives of this chapter were to improve our overall understanding of religious affiliations in contemporary Japan by using new data to more accurately tally percentages of individual affiliation and to test whether the theories of socialization and

deprivation predict affiliation with Buddhism, New Religions, and Christianity. Results from multivariate analyses indicate that deprivation theory helps explain individual belief in New Religions but not in Buddhist or Christian groups, and aspects of socialization theory predict belief in all three religions. Socio-demographic controls, such as gender, age, education, income, and urban-rural living are also significant.

Another contribution this chapter makes is that it shows how these theoretical controls correlate differently (and, to a lesser extent, similarly) with individual versus household affiliation. This dataset allows us to make a clear distinction between the two: individual affiliation measures self-reported "belief" in a religion and household affiliation indicates that the respondent has a family religion but does not, necessarily, believe in it. They are not the same entities and should not be treated as such. The findings presented here support the need to differentiate between personal and household religions when investigating Japanese religious affiliation.

In the past, misleading statistics, small samples, and a lack of individual-level nationally representative datasets have made it impossible to examine the effects of a range of measures on Japanese religious affiliation. Although ethnographic research has yielded detailed accounts of these organizations, often they are limited because they focus almost exclusively on one region of Japan, one religious group, or a few in-depth examples. In this chapter, I have used a large dataset to explain some of the discrepancies between different methods of analyses on this topic and to present the first detailed account of religious affiliation in contemporary Japan based on a nationwide sample. For the most part, we find that these data support the findings of qualitative studies and they can be used to answer new questions. Though there is a small percentage of Japanese who claim religious affiliation, now we have a better understanding of who these individuals are

and what we still need to investigate to provide a more comprehensive interpretation of religious affiliation in Japan.

Future Directions

In addition to what we learn from the findings discussed above, what is missing is also worth addressing. For example, it is still unclear why so many Japanese individuals claim to believe in Buddhism because, for centuries, Japanese Buddhism has been predominantly *non*-exclusive. That is, few temples or specific Buddhist sects require individual registration or membership or hold group worship services or other gatherings frequently. For centuries, all families were required to register with local Buddhist temples as parishioners, but this tradition has not been mandated by law since the late 1800s. Moreover, such registration was never an accurate measure or *belief*, *faith*, *practice*, or devoted *belonging* to a temple. Rather, the government used it to control the people by limiting religious freedoms (specifically Christianity) and maintaining a census.

The findings in this chapter reveal that Japanese who personally claim to believe in Buddhism tend to be older, live in rural areas, belong to hobby groups, and desire a traditional burial; however, this does not tell us what makes *these* individuals claim to be Buddhist versus the majority of the population who may visit temples and conduct customary Buddhist rituals at—possibly—equal rates but do *not* claim affiliation. Data limitations inhibit our ability to compare frequencies of ritual participation, for example.

The JGSS and other survey-based datasets on Japanese society lack questions on some of the most common forms of religiousness in Japan. The JGSS is limited to questions about affiliation with and devotion to *organized religions* but does not include any questions on household rituals, for instance. This is a significant oversight. Especially for older Japanese, rituals performed at family ancestral/Buddhist altars (*butsudan*) or household shrines (*kamidana*) are widespread, and studies indicate that around 76 percent

of those surveyed have a *butsudan*, a *kamidana*, or both (Okada 1994:607). Other regular rituals include different forms of *omairi*, such as visits to Shintô shrines or Buddhist temples and purchasing amulets (*omamori*) to express concern (Traphagan 2004). If we are going to continue using survey data to explore Japanese religious beliefs, expressions, and experiences, it is essential that surveys add such topics.

The scientific study of religion has flourished in recent decades. Nonetheless, there is still a great deal of debate in the U.S., for example, over appropriate measures of religious denominations (see e.g., Steensland et al. 2000), the accuracy of measuring church attendance (see symposium in *American Sociological Review* 1998), the influence of selection effects on religious impacts (Regnerus and Smith 2005), and many other issues. New large-scale qualitative studies (e.g., Smith 2005) and mixed methods research on the development of survey measures of religion for older U.S. adults (Krause 2002a) enable scholars of religion in the U.S. to more carefully examine and discuss these topics. Additionally, Idler and colleagues (2003) developed a battery of survey questions on religion and spirituality for religion-health studies. Though some scholars debate the validity of these measures in cross-cultural research (e.g., Traphagan 2005), as a whole these works have made significant advancements for the study of religion in the U.S.

Studies of religiousness in Japan, however, are not as data-rich. Although there are a number of informative qualitative works, they can be supplemented with large-scale national survey data, provided that we ask the right questions. As argued here, the data that are currently available present only parts of the completed picture. The social scientific community would be well served by the creation of a survey instrument that relies on in-depth research to design questions that will yield a more comprehensive portrayal of individual religiousness in contemporary Japan. Until then, this study aims to help address shortcomings in the literature, and future research should add more

common religious measures and explore other theoretical predictors of religious behaviors and beliefs in Japan.

ENDNOTES

[1] Japanese "New Religions" include those established in the past 150 years or so. Often, they include beliefs and practices taken from Buddhism, Shintô, and other traditions. In terms of membership, they are more exclusive than Buddhist or Shintô sects (see Hardacre 1986; McFarland 1967; Reader 1991; Shimazono 2004).

[2] The official JGSS English translation for this question is "do you practice a religion?" and the second answer category is translated as, "although not practiced, I have a family religion". The word *shinkô* does not indicate 'practice', necessarily, so I have replaced that word with 'belief' or 'faith', which I feel are more accurate translations. Also, I use the term "household" instead of "family" because the former is more inclusive of previous generations, not just living relatives.

[3] 'Buddhism' includes "Buddhism" and the Zen, Tendai, Jôdo, Jôdoshin, Shingon, Nichiren, Ji, and Hokke sects. 'Christianity' includes "Christianity," Catholicism, Protestantism, Greek Orthodox, and Jehovah's Witnesses. 'New Religions' include Honmon Butsuryû-shû, Ooyama Nezunomikoto Shinji Kyôkai, Sekai Kyûseikyô, Sûkyô Mahikari (Mahikari), Sôka Gakkai, Risshô Kôseikai, Reiyûkai, Bussho Gonenkai, Kôfuku no Kagaku, Tenrikyô, Shinnyoen, PL Kyôdan, Reiha-no-Hikari Kyôkai, Byakkô Shinkô-kai, Seichô-no Ie, Gogokukyô, and Konkôkyô (see Shimazono 2004 for New Religion coding). Shintô is included in the 'Other' category because of its small sample size.

[4] I use the term "buddhas" throughout this dissertation to refer to the original Buddha (Siddhartha Gautama) as well as other buddhas that have been incorporated into Japanese Buddhism over the centuries (cf. Kawano 2005).

[5] Indeed, it is arguable that many people—not just Japanese—view "religion" negatively (see Fitzgerald 2003a).

[6] Examples of "new New Religions" generally include organizations that were founded in the past 50 years or so, such as Shinnyoen, Sûkyô Mahikari, GLA, Byakkô Shinkô-kai, Kôfuku no Kagaku, and some indigenous Christian organizations (see Shimazono 2004). In this study, I categorize these with the older 'New Religions.'

[7] Though Hardacre (1993) claimed that there were as many as 40 million New Religion affiliates in the early 1990s—close to 30% of the population, she admits that these figures were provided by the organizations and may not have included inactive members or those who have dropped out completely.

[8] The 2003 JGSS was a "split ballot" survey in which about half the respondents (N = 1,957) were given a questionnaire that repeated some of the main questions and topical modules and the other half (N = 1,706) had additional social network questions. Selection was randomized, and response rates were 55% for the first group and 48% for the second. The average for the two groups is 51.5%.

[9] Old system: Low elementary (6 years), High elementary (8), Junior high/Girls' high school (11), Vocational/Normal high school (14), University/Graduate school (16)

New system: Junior high (9), High school (12), 2-year college/College of technology (14), University/Graduate school (16) (see Nishimura 2003 for similar coding with JGSS data).

[10] Because there was substantial non-response with the Household income question (33%), I created a new income variable that includes the mean of the original income to replace the missing data. An income_miss variable is included in all models to account for this change.

[11] Other surveys that have used variations of this question have yielded higher positive frequencies. For example, the survey I created for Chapter 4 of this dissertation asks, "Do you have a religion or religious sect you believe in?" (*shinkô shite iru shûkyô・shûha wa arimasu ka*). Over 100 (34.07 percent, weighted) claimed to have a religion they believe in personally, an additional 46.48 percent claimed a "household religion", and the remainder denied any affiliation, personal or familial (see Chapter 4). Additionally, the 2000 Asian Values Survey—which includes a national random sample of 1,000 Japanese adults—yielded a 27.90 percent rate for those who claim to "have a religion" (*shûkyô wo omochi*). This question does not distinguish between individual and household religion, however.

[12] To further examine this association, I divided Age into four categories: 20-34, 35-49, 50-64, and 65 and older. There were only a couple of significant associations and no clear age-based patterns so I did not report these results.

[13] It is plausible that urban residents are less likely to admit to believing in Buddhism because of social stigmas in their environment. Buddhism is a traditional religion and may be more appealing and socially acceptable for those in rural areas.

[14] The income_miss variable is also significant and negative (OR = .63, $p < .001$).

[15] As suggested by Aiken and West (1991), the cross-product variables are mean-centered (i.e., each score is subtracted from the mean to generate deviation scores with a mean of zero) to improve overall efficiency and reduce multicollinearity between the interaction coefficient and lower-order terms.

Chapter 2: Religious Rituals and Well-Being in Japan: Theoretical Explanations and Underlying Mechanisms

The intersection between religion and well-being has received a great deal of academic interest in recent decades. Despite the theoretical advancements and empirical support of these works, as explained in the Introduction, they are predominantly limited to U.S. samples. To what extent can these interpretations be applied to societies in which religion varies from the monotheistic, exclusive models of Judaism and Christianity, for example? Are there culturally specific explanations that are more appropriate in some societies than in others? To help address these questions, this chapter uses a theoretical model and provides examples from interviews I conducted with 17 Japanese adults (ages 20-83) to illustrate how connections between well-being and ritual behaviors and religious beliefs may exist in the Japanese context. Ultimately, these relationships are most likely indirect and work through emotional and psychosocial mediators. Some of these mediators differ substantially from examples found in previous studies, providing strong support for the need for continued research in a variety of social contexts.

In this chapter, I examine relationships between household ritual participation and well-being. The concept of well-being includes mental and physical health as well as overall life satisfaction and social connectedness. Well-being in Japan is defined by the medical field and by social relations and cultural norms. Thus, it is a multidimensional term that refers to a variety of aspects of individual and community health and wellness (see Traphagan 2004; Weiss et al. 2005).

To examine these connections, this chapter begins with an overview of the religion-health literature based on U.S. studies. The next section summarizes the few publications that address this topic in Japan. I follow this discussion with theoretical

explanations that help clarify how common religious practices and beliefs may be tied to well-being in Japan. Namely, I argue that the theories of rational choice and religious coping help explain why Japanese turn to specific rituals in times of trouble. I also suggest that the interpretation of Japanese religiosity as ultimately concerned with well-being provides an explanation for why rites and beliefs are associated with the *maintenance* of wellness. In the following section, I describe of the methods of research used for this study and the interview sample. The next section includes descriptions of the core practices, beliefs, and underlying mechanisms involved in household rituals, a theoretical model to demonstrate how these characteristics are related, and empirical support from the interviews.

The data in this study suggest that frequent household ritual involvement is connected with well-being in Japan in several—often overlapping—ways. For some, these behaviors become an important part of their *habitus*. Others connect or reconnect with or are protected by their ancestors, *kami* (gods, deities, and spirits), or buddhas. My informants also revealed that these rites often bring serenity or act as stress reducers. Additionally, rituals and belief systems in Japan seem to generate a strong sense of gratitude towards one's ancestors, *kami*, and buddhas, and I discuss how this sentiment surpasses religious affiliation, beliefs, and the types or frequency of ritual involvement. The chapter concludes with a discussion of arguments made here and some comments concerning the need for further research.

HOW RELIGIOSITY AND WELL-BEING ARE CONNECTED

In recent years, social scientists in the United States have provided a number of explanations for how and why religion and well-being intersect (for reviews see e.g., Koenig, McCullough, and Larson 2001; Idler et al. 2003; Jones 2004; Schaie, Krause, and Booth 2004). Some of the means by which these connections exist include social

integration, social solidarity, and perceived and enacted support with fellow worshippers or with the divine (see e.g., Ellison and Levin 1998; Krause 2006a). Other agencies are the promotion of healthy lifestyles, frameworks of meaning, or coping mechanisms that help individuals deal with life's stressors (Pargament 1997), and some claim that religious beliefs and behaviors induce positive emotions that affect one's physiological health (Levin 2001).

The question posed in this chapter is *to what extent are these mechanisms associated with well-being in a developed non-Western, non-Christian society?* A few publications that examine non-Christian groups in the United States include studies on Jews and depression by Levav et al. (1997), religious coping and depression among American Hindus (Tarakeshwar, Pargament, and Mahoney 2003), and coping and ethnic identity for Jewish children in a mid-sized Midwestern city (Dubow et al. 2000). Also, there are some works that address meditation and its stress-reducing effects on the mind and body (for recent reviews see Pillar 2007; Seeman, Dubin, and Seeman 2003).

Additionally, there are a small number of studies that examine these relationships beyond U.S. borders. Lalive d'Epinay and Spini (2004) provide an overview of the few publications that have addressed this topic in Europe. Braam and colleagues (2004) found strong associations between church attendance and positive mental health among their Dutch sample. In a qualitative study of Scottish Aberdonians, Williams (1990) argued that a "Protestant legacy" provides a framework for coping with and interpreting illness, old age, and death. With a Canadian sample, Schieman, Nguyen, and Elliott (2003) discovered connections between religiousness and sense of mastery that are meditated by socio-economic status. Although these works expand our knowledge of religion-health relationships, mainly they deal with Christians in other countries.

A few exceptions are Anson and Anson's (2000) research on the weekly cycle of mortality among Israeli Jews and Ghorbani and colleagues' (2000) study that employs a sample of Iranian Muslim college students to analyze ties between religious attitudes and psychiatric symptoms, among other outcomes. Trinitapoli (2006) found that Malawian Christian and Muslim religious organizations are responding to the AIDS crisis in a number of ways that are helping their laity, and Emavardhana and Tori (1997) discovered that Buddhist meditative practices in Thailand have positive effects on self-representation and coping skills. Further, a few studies have investigated the religion-health relationship cross-culturally. For example, Watson and colleagues (2002) examined links between intrinsic and extrinsic religious motivations and mental health among Iranian and U.S. college students, and Tapanya, Nicki, and Jarusawad (1997) explored how worry and extrinsic and intrinsic religious orientations are related among Thai Buddhists and Canadian Christians.

Together, these studies indicate the influence of religiousness on health and well-being in different religious and social contexts.

RELIGIOSITY AND WELL-BEING IN JAPAN

On the surface, at least, Japan is similar to the United States and other highly modernized, post-industrial democratic nations. Religious and other social norms vary dramatically, though, making it an ideal country in which to test some of the theories previously applied to non-Asian populations (cf. Miller and Stark 2002). Unlike the U.S., in Japan regular frequent attendance at religious services, absolute faith in an omnipotent creator God (or gods), and exclusive religious affiliation are rare (Kisala 2006). A minority belongs to New Religions and only 1-2 percent is Christian. Buddhism and Shintô are non-exclusive—most Japanese practice rituals of both religions for different occasions, and the only official records concerning membership are generated by temples and shrines

and *not* by individuals. Therefore, even though Japan's Ministry of Internal Affairs and Communications reported that 1.5 times the population was Shintô or Buddhist in 2005 (Statistics Bureau 2008:747), as revealed in Chapter 1 it appears that only ten percent personally *claims* affiliation with a religion.

In the previous chapter, I explained that more appropriate and common characteristics of mainstream Japanese religiousness include 1) a focus on practices and rites over doctrines, theology, or meanings, 2) concern for this-worldly benefits, particularly individual and collective well-being, 3) ancestor veneration, and 4) beliefs in the existence and efficacy of, generally, nonfigurative *kami* and buddhas.

Concerning religion-health associations in Japan, there are only a handful of publications. Using survey data, Krause and colleagues discovered significant, positive correlations for older Japanese between self-rated health, religiosity, and giving social support (1999b) and religious beliefs, death of a loved one, and reduced levels of hypertension (2002). Applying similar methods, Tagaya and colleagues (2000) sampled over 1,900 Japanese elderly from a small rural town and found strong positive relationships between social support and prayer and religious attendance. Using qualitative methods, I have also noted strong ties between ritual involvement and social support (Roemer 2007). Shatenstein and Ghadirian (1998) discuss how the restricted diet of select Buddhists and Seventh-Day Adventists in Japan is connected with lower cancer and mortality rates. Japanese psychologist Ryô Nishiwaki (2004) found statistically significant associations between belief in the existence of *kami* and *hotoke* (ancestors, buddhas) and positive mental health with samples of junior and high school and college students.

Based on extensive fieldwork conducted in 1979 and 1980, anthropologist Emiko Ohnuki-Tierney discovered that Japanese often visit temples and shrines to seek personal

health or to pray or purchase *omamori* (amulets) or *ema* ("prayer boards" 1984:137) for the well-being of others. She discusses at length the influential "*symbolic*" roles that these religious establishments play in daily well-being (166, emphasis added). Though mental and physical health are by no means the sole reasons for these visits, they are common (see also Lock 1980; Nelson 1996; Reader and Tanabe 1998). Especially since the 1990s, religious and secular 'healing' practices have become increasingly popular for Japanese of all ages (Yumiyama 1995).

Other anthropologists, such as John Traphagan and Satsuki Kawano, have made similar claims concerning ties between religious behaviors and beliefs and well-being. According to Traphagan, "Japanese religious practice is most directly associated with the wellness of being, both for the living and the dead" (2004:19). Here, he is stressing a reciprocal relationship that centers on well-being: the ancestors protect the living relatives and the living keep the memories of the dead alive by conducting certain rituals. Elsewhere, Traphagan (2000) has also discussed how religious behavior can be a resource of power for elderly men, and he mentions this as a possible link to good health.

Kawano (2005) addresses how ritual acts in Japan embody certain morals that focus on individual and collective (i.e., family and community) wellness. By making offerings at *butsudan* (home ancestral/Buddhist altars) or *kamidana* (household Shintô shrines), visiting Shintô shrines or Buddhist temples in times of need, and participating in or attending festivals (see Roemer 2006, 2007), Japanese reinforce and develop relationships with each other and with their ancestors and various *kami* and buddhas to assure their overall well-being. Taken together these findings indicate that the religion-health connection in Japan is theoretically plausible but that further research is needed (cf. Musick et al. 2000). Many of these studies are limited by the religious measures used in survey data or by their small or localized samples. Further research is required with

different data and with multiple methods of research to understand these relationships more clearly.

THEORETICAL APPROACHES TO STUDYING RELIGIOSITY AND WELL-BEING IN JAPAN

Throughout the first half of the twentieth century, scholars of Japanese religion relied heavily on Weber's theories. According to Hayashi and Yamanaka (1993), Yanagawa Kei'ichi was one of the first Japanese religion scholars to question the validity of Weber's models in the Japanese context. Because Protestantism is not an influential force in Japan, Yanagawa claimed Weber's model as inappropriate. Instead, he utilized methods of ritual study influenced by Levi-Strauss, Eliade, and Victor Turner to view Japanese religions from an active, personal experience—not doctrinal. Since Yanagawa's assertions, few Japanese scholars have returned to Weber's ideas to analyze their own religious beliefs and practices.[1] Instead, most Japanese and non-Japanese scholars have emphasized that Japanese religiousness is quite different from Judeo-Christian traditions, and they have argued that we should rely upon different models (Hayashi and Yamanaka 1993).

Several recent studies have provided new theoretical explanations for why Japanese conduct these rituals and maintain certain beliefs concerning *kami*, buddhas, or the afterlife. For example, sociologist Winston Davis argued that Japanese are motivated by "'because of' obligations" or "'in order to' motivations" (1983; 1992:31). Reader and Tanabe (1998) disagree with Davis and claim that these actions are based on the "purchase" of religious or secular goods (33). Others describe these rites as "contracts" (Martinez 2004:144) or ritual exchanges with *kami*, buddhas, or ancestors to express concern for (dead and living) relatives and friends (Kawano 2005; Traphagan 2004). Although there are definite distinctions among these theories, one common theme is the

emphasis on some sort of rationally-motivated exchange with other humans or with the non-corporeal for the purpose of obtaining some kind of 'this-worldly' benefit (*genze riyaku*—see Reader and Tanabe 1998). More broadly, some assert that the ultimate concern of Japanese religiousness is individual and collective well-being (Traphagan 2004, 2005). These arguments indicate that religiousness in Japan can be interpreted as consciously *or* unconsciously derived rational choices that are primarily concerned with wellness of being. Simply stated, what makes these decisions "religious" is the context within which they are made (i.e., as part of household rituals or rites at shrines and temples that are made in the presence of or for the benefit of mystical or supernatural beings, for example). As Kawano (2005) has aptly explained, these behaviors and beliefs are 'embodied' and 'emplaced' in such a manner as to distinguish them from ordinary or everyday actions and rational decisions that may also be about well-being (e.g., cleanliness, diet, and exercise).

Rational Choice Theory in Religious Studies

Advocates of rational choice theory in U.S.-based religious studies argue that these informed or incognizant decisions are 'embedded' in social contexts (Sherkat and Ellison 1999). That is, individuals make decisions based on choices available to them to 'maximize' their rewards and benefits (Homans 1961; see also Stark and Finke 2000; Young 1997). In doing so, they make exchanges with others (humans, *kami*, buddhas, ancestors, etc.) to ensure that their actions result in optimal benefits based on what they know, what they have experienced, and what is accessible to them. The keys are to focus on the exchanges and to recognize that individuals do not always set out to maximize their benefits consciously. Rather, these objectives are likely to be subconscious or taken for granted, so that an individual could be acting to maximize benefits without recognizing or admitting her or his actions as such. For a Christian in the U.S., for instance, this may

mean regular church attendance with the outward *or* subconscious desire to go to Heaven after death. Based on this interpretation, rational choice theory provides an appropriate theoretical model for interpreting certain religious behaviors and beliefs.

Rational Choice Theory in Japanese Religiousness

Especially in times of loss, illness, or other struggles, Japanese commonly take a rather calculated approach to religious behaviors and faith. For example, Shintô shrines and Buddhist temples compete to offer a seemingly endless supply of ritual remedies for physical, mental, and spiritual well-being, financial or academic success, and personal safety, among many others (see Reader and Tanabe 1998). Japanese are free to—and often do—enact rituals based on specific needs, desires, occasions, and locations.

According to sociologist Alan Miller (1995), the practical nature of Japanese religiosity makes the rational choice model even more appropriate in the Japanese context than in the West's. To support his claims, Miller used data from the 1977 Survey of Japanese Values and Behaviors and found that those with a chronic illness and those who recently suffered from the death of a family member or close friend were highly likely to visit temples or shrines or to pray (240). In times of such loss, Miller asserted, these ritual behaviors offer group support for the mourner (236).

Though this may be true, it is important to recall that very few Japanese belong to a religious congregation, so they are not likely to seek or receive the same forms of co-religionist support that might stem from a Christian church, for example. Formal funeral ceremonies led by Buddhist priests, for instance, may exemplify this form of assistance because they are group ceremonies. However, the rites Miller discussed most commonly are practiced on an individual basis. 'Benefits' from death-related rituals in Japan are more likely to be based on exchanges with one's ancestors, *kami*, or buddhas, rather than group support from living relatives or from friends. Nonetheless, it is evident that these rituals

are carried out for the expressed purpose of consolation for the living and the dead. In times of such loss or suffering, Miller purported that Japanese choose certain rituals and beliefs based on "logically derived explanations and general compensators" (1995:235).

Religious Coping in Japan

Along those lines, another common theme of Japanese religiousness is to 'turn to the gods in times of distress' (Nelson 1996:141; Reader 1991; Traphagan 2004:98, 2005:405). Many also seek aid from their ancestors (Klass 2005). Therefore, the theory of religious coping is another appropriate analytical tool that overlaps with rational choice theory in this context. Psychologist Kenneth Pargament explains religious coping as "the search for significance in the face of stressful life situations" (1996:217), and he argues that religion provides spiritual support and an important sense of purpose and significance that help one deal with life's unfortunate and difficult situations (see also Ferraro and Kelley-Moore 2000; Loewenthal 2007; Krause et al. 2001; Musick 1996; Pearce 2005; Schaie, Krause, and Booth 2004:114-162). Particularly with situations seemingly beyond one's control, scholars have shown that coping mechanisms found in religious faith and through rites can have especially powerful effects.

In Japan, certain rituals, beliefs, and the purchase of sacred goods are common in times of misfortune. For some, ritual interactions with one's ancestors or with a host of abstract and somewhat disconnected *kami* and buddhas are common. For others, periodic shrine or temple visits or pilgrimages and the purchasing of amulets (*omamori* or *ema*) and talismans (*ofuda*) to protect one's family and friends or to show concern are valuable sources of comfort (Martinez 2004:402; Traphagan 2004:81). Additionally, because religious affiliation is irrelevant for most Japanese, they can visit any shrine or temple throughout the country to seek solace based on their specific needs.

Japanese religiosity also provides meaning. In Gordon Matthews' (1996) ethnographic study *What Makes Life Worth Living* in Japan and the U.S., he provides examples of Japanese who find meaning in life from religious practices and beliefs (see also Lebra 1984:162-163). Similarly, Traphagan (2005) argues that ritual *enactment* helps provide meaning to ultimate questions, such as those regarding life and death (see also Kawano 2005). In life's most troubling times, especially, religiousness can become an essential source of comfort and provide meaning for Japanese.

Ultimate Concern in Japanese Religiousness

Religious beliefs and behaviors in Japan are not always enacted in times of misfortune, however. To explain these behaviors in less stressful times this section focuses on aspects of religiosity in Japan that are also about the *maintenance* of well-being. The theory of ultimate concern is best characterized in Japan by the social emphasis on well-being, both personal and societal. Japanese religiousness is about wellness in this lifetime for the living and about concern for the well-being of the dead (Traphagan 2004). Physical and mental health are not the only aspects of well-being desired via religious rituals in Japan, though they are central.

Another interpretation is that, for many Japanese, ritual behaviors provide 'embodied moral order,' and this structure also focuses on individual and communal well-being (Kawano 2005). The frequent performance of sacred acts, such as household rituals and shrine or temple visitations, reinforces social structures in daily life and maintains certain norms, such as social hierarchies, respect, and purity. Compared to Christianity, Judaism, Islam, or similarly monotheistic or exclusive religions, an important difference here is that in Japan it is a *physical embodiment* of ritual behaviors—rather than cognitive reasoning or morals that stem from doctrines or theologies—that reflects concern for well-being. Even when life is not plagued by losses or illness, many Japanese sustain certain

practices and beliefs because they help provide tangible structure in life (Kawano 2005) and because the rites act as continual expressions of concern for the wellness of both the living and the dead (Traphagan 2004). What we can determine from these studies is that, for most, religious acts and beliefs in Japan are ultimately concerned with tangible goods or rewards on earth that are believed to help secure individual or collective well-being.[2]

INTERVIEW DATA AND INFORMANT DESCRIPTIONS

Data from this chapter come from semi-structured interviews during the summer of 2007 with a total of 17 male and female Japanese adults in Kyôto city. Informants were gathered from a strategic snowball sample. I began by interviewing some of my informants from previous research (Roemer 2007) and others who I knew either considered themselves "religious" based on beliefs or religious affiliation or those who frequently conducted household rituals. I asked them to introduce me to others who also fit these criteria. Additionally, I met two Catholics during a month of participant observation at a large Catholic church in Kyôto. I attended weekly masses, joined a group of 24 parishioners to clean graves at a Christian cemetery in the city, and attended a meeting with nine parishioners who meet once a month to discuss the history of Christianity in Japan. I introduced myself to these two informants during the cemetery cleaning and met with them later for separate interviews.

Interviews were based on six primary questions. Although the order and amount of time spent on each question varied per individual, core topics included: general questions about health, more focused questions on social/group activities, how they deal with life crises (such as serious illness or injury, death of a loved, etc.), their involvement and beliefs surrounding household rituals, questions about their religiousness, and impressions concerning *kami* and *hotoke* (see Appendix A). For the most part, interviews were conducted in that order. Almost all interviews were digitally recorded (except for

Mr. Tanizaki's and Mr. and Mrs. Yasuda's), and I took notes as we talked. Duration of interviews ranged from 35 minutes to over two hours.

The data presented in Table 2.1 on the following page are from a six-question self-administered survey I gave each informant at the end of the interviews (see Appendix B). As the table reveals, twelve informants were men, ages at time of interviews ranged from 20 to 81 (the mean age was 61), and occupations included retired, primarily a homemaker, a part-time employee, self-employed small business owners, and the chairman of a multi-national corporation. All but one had at least a high school education, and almost everyone in the sample rated his or her physical health as "good" or "excellent." With a few exceptions, most placed themselves somewhere in the middle class—a common trend in Japan (cf. Iwai and Satô 2002:149-154). Concerning religiosity, they were allowed to circle more than one option, and seven informants answered that they were "very religious/devoted [*shinshin fukai*]", ten claimed a religious affiliation (including two members of Jôdo Shinshû Buddhism, two "Shintô-Buddhists", two Catholics, two Sôka Gakkai members, one "Buddhist", and one member of the New Religion Konkôkyô), three said they were "somewhat religious [*maa maa shinshin fukai*]", another three answered, "though I am not religious, I do rituals [*shinshin fukaku wa nai ga, ugandari oinori wo shitari suru*]", and one claimed to be atheist [*mushinronsha de aru*]. The latter, Mr. Suzuki, was introduced to me by Mr. Inaba, a Jôdo Shinshû priest, as someone who has attended public discussions on Buddhism. When we began our conversation, Mr. Suzuki introduced himself as a Zen Buddhist, but through the course of the discussion, he indicated that he is only "Zen" because of his filial (and ritual) obligation to uphold twenty generations of Zen lineage at the temple where his ancestors are enshrined. When he answered the survey, he did not indicate that he belonged to a religion; he only circled "atheist."

All names in the table are pseudonyms to protect the identities of the informants.

Table 2.1: Informant Descriptions.

Pseudonym	Age	Occupation	Education	Health	Social Rank	Religiousness
Mr. Fujiwara	76	Manager	College	Excellent	Middle-upper	Very/Catholic
Mr. Inaba	37	Priest	College	Excellent	Middle-lower	Jôdo Shinshû
Mr. Kano	67	Self-employed	Junior College	Good	Middle-upper	Jôdo Shinshû
Mr. Suzuki	83	Retired	High School	Good	Middle-lower	Atheist
Mr. Mori	43	Regular employee	College	Can't say either way	Middle-upper	Very/Shintô-Buddhist
Mr. Yamane, Jr	20	Part-time	High School	Excellent	Middle	Very/Sôka Gakkai
Mr. Tanizaki *	71	Manager	High School	Good	Middle	Do rituals
Mr. Sakamoto *	81	Executive	College	Good	Upper	Somewhat religious
Mr. Endo *	70	Manager	College	Good	Middle-upper	Shintô/Buddhist
Mr. Kawabata *	53	Self-employed	Technical college	Good	Lower	Very/Shintô-Buddhist
Mr. Yamane, Sr.	54	Self-employed	Technical college	Excellent	Middle	Very/Sôka Gakkai
Mr. Yasuda	65	Executive	High School	Good	Middle	Do rituals
Mrs. Yasuda	65	Housewife	College	Good	Middle-lower	Somewhat religious
Mrs. Suzuki	82	Retired/Housewife	Middle school (old system)	Good	Middle-lower	Very/Konkôkyô
Mrs. Kawabata	54	Self-employed	Technical college	Good	Middle-lower	Do rituals
Mrs. Mori	40	Self-employed	College	Good	Middle-lower	Somewhat religious
Mrs. Matsumoto	72	Volunteer	High School	Excellent	No answer	Very/Catholic

* Indicates informants included in previous research as well (see Roemer 2007)

HOUSEHOLD RITUALS AND WELL-BEING IN CONTEMPORARY JAPAN

The most common household rituals include offerings and prayers made at the Shintô b*utsudan* (household Buddhist or ancestral altar) and at the *kamidana* (household shrine, literally "*kami* shelf"). These rites can be conducted regularly throughout the year and are, therefore, more likely than seasonal practices (at New Years, for instance) to impact one's well-being on a regular basis.

Today, ancestor veneration often includes a blend of Buddhist and folk beliefs and practices that center on a family's patrilineal ancestors. Typically, a Japanese main family (*honke*) will have a *butsudan* in their home, and other branches of the family may also have one. Although the physical size of one's residence may prevent a nuclear family from owning a *butsudan* or the stem family may be too new to have lost any family members (Kawano 2005), most Japanese consider ancestor veneration as vital regardless of whether they own one (Kaneko 1990; Klass 1996, 2005; Roemer 2006). Recent community and nationwide surveys indicate that between 59 to 78 percent of Japanese households own *butsudan* (see Kawano 2005:32; Kaneko 1990:6).[3]

Common rituals at the *butsudan* include lighting candles on the altar, making offerings of certain foods, and possibly saying memorized[4] or informal prayers (for recent reviews see Kawano 2005; Klass 2005; Traphagan 2004). In actual practice, there is a great deal of variation in ancestor veneration, and depending on the individual, focus may be on the most recently departed, other ancestors, or one of many buddhas in the Japanese Buddhist cosmology. For others, it is the ritual act itself—not the object(s) of attention—that is central and may impact well-being.

Kamidana rites are most often associated with Shintô *kami*, and there are some behavioral variations compared to *butsudan* practices. For instance, according to official Shintô manuals, these rituals begin with washing one's hands and mouth and freshening any floral or other decorative arrangements around the *kamidana*. This serves as a purification of the practitioner and the sacred space indicated by the *kamidana*. Next, one is to place an offering (typically uncooked rice, water, or salt) on the altar, make one slight bow then two deeper bows, and pray in silence. The ritual enactor then bows again twice deeply, claps her hands twice, and makes another deep bow then a slight bow. Food offerings are later added to a meal to be symbolically shared with the *kami* and family

(Ono 1993). Similar to ancestor veneration, actual practices tend to vary per individual, household, or region. Most *kamidana* rites I have witnessed include an offering of water or salt followed by two claps and one deep bow. According to recent statistics, the percentage of Japanese who own *kamidana* has declined slightly in recent decades. Still, approximately half of most national samples maintain *kamidana* in their homes (Ishii 2004:31-32).

Household Rituals and Well-being: Previous Research

Based on the research of others, ancestral veneration and *kamidana* rites may be related to well-being because they provide the ritual enactor with "companionship, protection, or moral guidance" (Klass 1996:287; see also Kawano 2005), "solace" (Klass 1996:295; Morioka 1984), or "comfort/cheering" (Offner 1979:11). Additionally, by participating in these rituals, people may gain a sense of mastery—albeit to varied degrees—over their own lives and that of their friends and family. In Japan, many feel that making regular offerings at a *kamidana* or praying in front of a *butsudan* are important social "responsibilit[ies]" (Kawano 2005:22). These obligations often are highly valued in society and are for the well-being of the family. Thus they give the persons who conduct the rituals a sense of control over their families' corporeal and posthumous worlds because they are taking an active role in collective and individual well-being maintenance or improvement (see also Matthews 1996; Ohnuki-Tierney 1984; Traphagan 2004).

It is also likely that the act of prayer has well-being and psychological benefits. Some claim that prayer can provide order or meaning in life, connect individuals with divine or sacred beings, generate hope that stems from the belief that prayer can impact an outcome, or lead to transcendence "of the body, of space, of time" (Levin 2004:85-86). Similarly, meditation can reduce stress and help an individual resolve conflicts by

establishing a quiet, less distracting environment, allowing one to concentrate on other matters, and encouraging unobstructed freedom of thought (see Choo Chang 2005; Seeman et al. 2003). Still, more research is needed before we can make strong conclusions concerning the health effects of prayer and meditation (for reviews see Epperly 2000; Poloma and Pendleton 1990; Schaie et al. 2004:69-113).

In Japan, prayer is one of the more common acts of private worship (Levin 2004:78), and according to Traphagan, it is one of many religious behaviors that is "central…to maintaining collective and individual well-being" (2004:92). However, Traphagan and others assert that prayer in Japan is less about direct contact with *kami*, buddhas, or ancestors and more about expressions of concern or connectedness with those for whom one is praying (see also Klass 1996; Tagaya et al. 2000). The findings from these qualitative and quantitative works indicate that the associations between prayer and well-being in Japan can be explained, partially at least, by the fact that the act of prayer reveals concern for and cohesion with others.

Household Rituals and Well-being: New Findings

Theoretical Model

First, by way of illustration, the figure on the following page (2.1) presents the theorized relationships between three specific dimensions of Household Rituals and Well-being and is based on findings from the semi-structured interviews. Although there is variation between ancestral and *kamidana* acts and the way individuals may interpret these behaviors, the purpose of this diagram is to provide a depiction of the core relationships and to note key intervening mechanisms.

Figure 2.1: Household Rituals Theoretical Model.

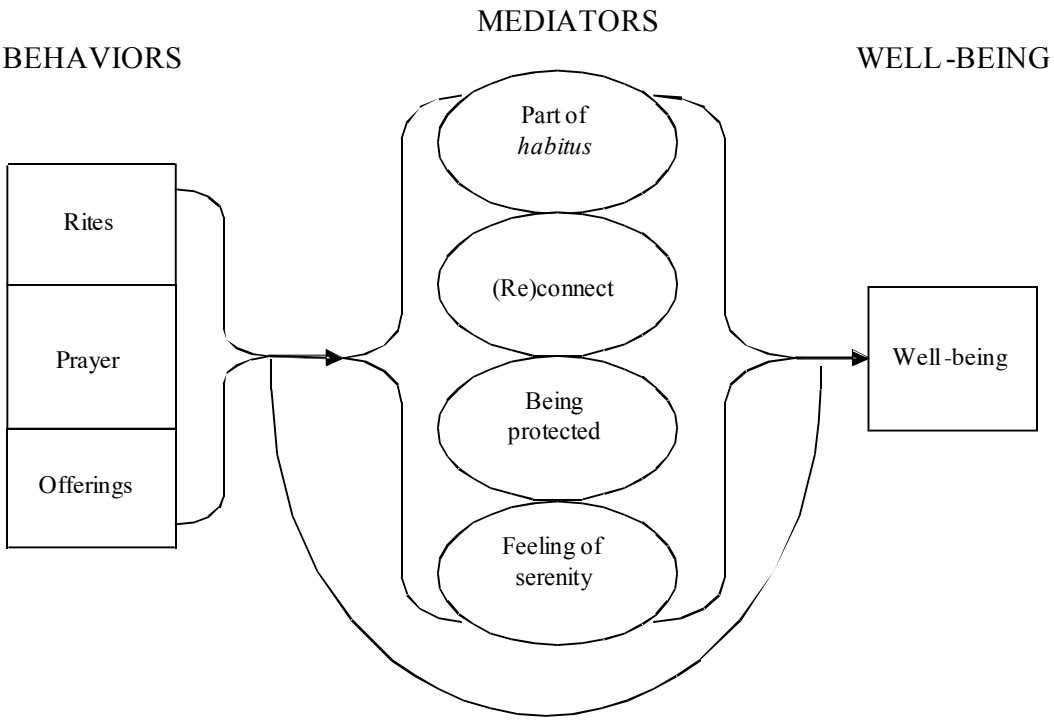


Figure 2.1 is divided into three "classes" of variables: Behaviors, Mediators, and Well-being. The class to the far left includes the acts of Rites (including beating a ceremonial drum, lighting candles, and sitting still), Prayer (including formal/memorized and informal prayers), and Offerings (such as special foods or drinks). Often these overlap and are enacted simultaneously. Similarly, rituals can be enacted alone or with other family members or friends. I have distinguished between these three behaviors to clarify this discussion and to reveal how each may be related to well-being.

The variables in the middle are the mediating or underlying forces that, according to my informants, help explain how these behaviors are linked to well-being. Namely, the

rites become an important part of their *habitus*, allow them to connect or reconnect with ancestors, *kami*, or buddhas, make them feel "watched over," and are tied to feelings of "serenity."

I assume that all associations in this model are positive and reciprocal—I do not claim that these behaviors *cause* positive well-being because wellness may also impact one's ability and desire to conduct the rites. Based on the aforementioned theoretical explanations and the examples presented below, it is likely that these ritual behaviors are tied to positive well-being via direct and indirect means. Performing these rites can be directly connected with well-being (as indicated by the curved line that directly ties Behaviors to Well-being) because, for some, it is the actions themselves—regardless of intervening beliefs, emotions, or sensations—that are associated with individual wellness. For others, these correlations are mediated by a number of factors that may also be interrelated.

In order to describe these relationships in greater detail, I turn now to specific examples from the interview data. Four themes emerged from the men and women I spoke with: namely, that ancestor veneration and *kamidana* rites have become an important part of their lives, that they provide a link to the living and the dead and to *kami* and buddhas, that they give them a sense of being protected, and that they bring peace of mind. The following sections address each of these important intervening concepts.

Household Rituals and **Habitus**

For several informants, household rituals have become a vital part of their *habitus* (see also Ômura 1996:2). According to Pierre Bourdieu, a *habitus* includes individuals who share ways of thinking and behaving that are bounded by historically-driven 'dispositions' and power relations (1990, 1991). Concerning rituals, the *habitus* is closely connected with the body and not as much with the mind. Bourdieu argues that ritual

behaviors shape and define individuals and dictate how they organize their worlds (1990). The unique history and dynamic relationships within the *habitus* designate the boundaries of acceptable practice and cognition. According to this line of thought, frequent participation of household rituals becomes a deeply embedded and highly influential part of the *habitus*. It is part of who they are and how they find order and meaning in life, and just as Bourdieu's explanations focus on ritual *behaviors*, for many Japanese these rites may have very little to do with mystical beings or with belief systems. Rather, the *actions* can be directly related to individual well-being.

For example, one seventy-year-old male I interviewed explained that, for his father, ritual practices were a part of the "rhythm of his life [*seikatsu no rizumu*]." For Mr. Mori (age 43), the rites he conducts today are a direct result of his upbringing. His grandparents had several *kamidana* and one *butsudan*, and they and his parents made daily offerings at each altar. Although he does not have a *butsudan* at the home where he lives with his wife—the *butsudan* is still at his parents', he constructed a *kamidana* in his home because it was vital for him to continue these rites. The design of the house did not provide room for a *kamidana*, so he removed the doors to one of his kitchen cabinets and created a special place for an *ofuda* (talisman) from a neighborhood shrine. Like others I interviewed, every morning he greets the *kami* with a bow and makes an offering of water. He makes a point of offering the first water out of the faucet—even before he washes his face or hands or gets a drink. Offering the *kami* the first drink is an important part of his daily regimen, and he does this, in part, to continue the ritual obligations of his parents and grandparents.

Nonetheless, as Mr. Mori explained, he does not continue these rituals because he feels that *kami* are constantly looking out for him. In fact, he denied the regular protection of *kami* and instead explained that his ancestors (*senzo*) protect him on a more frequent

basis. His experiences provide an ideal example of how ritual acts—not faith in mystical beings, meanings, or doctrine—can be the focus of religiousness because he continues these behaviors despite the fact that he does not *believe* in constant protection from the object of his veneration (i.e., *kami*). He admits that *kami* exist, but he does not conduct these rites to seek daily intervention nor does he expect such aid.

Another informant, Mrs. Kawabata (age 54) admitted that she has doubts about whether *kami* or her ancestors actually protect or help her each day; nonetheless, she is as dutiful about making the day's first offerings to her ancestors at the *butsudan* as Mr. Mori is in making offerings at his *kamidana*. Since her father-in-law died six years ago, she makes a conscious effort to make morning offerings and pay her respects before going to sleep in the evenings, and she agreed that this is a part of the 'rhythm' of her life as well.[5] For these individuals and, doubtless, many more Japanese, household rituals are relevant to their well-being because they are an important part of their *habitus* and they provide stability, order, and meaning in their lives. For others, these actions also bring a sense of connectedness with their ancestors and with buddhas and *kami*.

Household Rituals and (Re)connections

In Japan, the self-concept is inseparably tied to other individuals (Doi 1985; Lebra 1992; Long 1999; Martinez 2004). Thus, social relations and feelings of connectedness are crucial components of individual wellness. Household rituals provide a structured spatial framework for getting back in touch with recently departed family members and distant ancestors and for communicating with *kami* or buddhas. According to Mr. Endo (age 71), before his family eats a meal, they first make an offering at the *butsudan* and *kamidana*. As he described it, this offering before they eat serves as an example of "people's connectedness [*hito no en*]", and he said that such actions are "mental and spiritual" ties to family—both living and dead. For many, making offerings or reciting prayers at the

family *butsudan* instantly brings back memories of one's parents, especially, and several informants talked about how the performance of these rituals helps them feel in touch with the dead (see also Traphagan 2004). It should be stressed that, more than a sense that the dead are close and present among them, these rites make most feel a somewhat abstract, inexplicable connection to the people they cared about and to people to whom they are grateful. For centuries, ancestor rites have been key symbolic unifiers of the main household—both dead and living (see Fitzgerald 2003b; Klass 1996; Morioka 1984), and these ties remain vital to the well-being of many Japanese in modernity.

Household Rituals and Feeling Protected

Rituals enacted at *kamidana* and *butsudan* are also correlated with well-being because they provide a feeling that one is being "watched over" by ancestors, *kami*, or buddhas. In the case of ancestor veneration, the living maintain the memory of the dead and prevent the ancestor from becoming a wandering spirit (*muenbotoke*). In exchange, the ancestors may be seen as protecting the family unit (cf. Lebra 1984). One 81-year-old man I interviewed explained,

> "Since I was young, I've always thought that, well, there are all sorts of situations that I had to deal with in life, and if I did my best, somewhere *kami* and *hotoke* would support me [*kokoro wo sasaete*] and watch over me [*mimamotte kureru*]."

Mr. Endo and Mr. and Mrs. Yasuda (both age 65) reinforced this sentiment that both *kami* and their ancestors protect and watch over them. As mentioned, Mr. Mori and others, however, denied such constant protection from *kami* but agreed that their ancestors look out for him.

For scholars of Christian traditions, these statements might conjure up images of saints, angels, or a God that is concerned with an individual's daily life. Though such

feelings of being watched over are important to the well-being of Japanese because they offer a sense of solace in the same manner that saints, angels, or God might, few Japanese see their dead relatives or *kami* in the same way. Most Japanese describe *kami* as abstract, non-figurative beings that can be punishing or helpful based on how they are treated. To my knowledge, "angelic" or "saintly" have never been used to depict them. Further, although Japanese are likely to have a more personalized impression of the recently departed they do not see them as saintly or angelic. The feeling of protection is from the same people they knew and cared for when they were alive, as well as from a more general collectivity of distant ancestors. In Japan, death does not separate household members completely. Rather, it is "a time of transition where individuals take on a new role within the household…" (Traphagan 2004:104). Ancestral aid comes from somewhere less tangible, beyond the corporeal—not necessarily from a paradise or hell, but it is still less abstract than the support or protection from *kami* or buddhas because it stems from someone they knew personally or to whom they have direct familial connections.

Household Rituals and A Sense of Serenity

As a final example here, I argue that frequent enactment of household rituals can positively affect well-being by bringing "serenity" and "quiet" to oneself and to one's *kokoro* (heart/mind/inner self). Every evening, Mr. Yasuda lights a candle at the *butsudan* and recites a Buddhist prayer while rhythmically beating a small wooden drum that is shaped like a frog. When I asked why he performs these rituals so regularly, without hesitation he replied, "It brings serenity to my *kokoro* [*kokoro ga ochitsuku*]." Another informant, Mrs. Kawabata, also explained that the offerings she makes and brief greetings she mutters in the morning and at night make her feel "at peace [*jibun no ochitsuki*]". In fact, both Mr. Yasuda and Mrs. Kawabata stated that if they are unable to or forget to

conduct these rites, they are "restless [*ochitsuki ga nai*]" and "feel uneasy [*fuan ni kanjimasu*]", as Mrs. Kawabata said. And, as Mr. Sakamoto thought about why he conducts these rites, he concluded, "the fact that *kami* and ancestors help keep the *kokoro* at peace is probably good for one's mental and general health."

Similarly, in two separate conversations, both Mrs. and Mr. Yasuda explained that these actions also serve to calm them when they are agitated. Interestingly, the example both gave was that when they are upset or frustrated by the other, they go to the *butsudan* and recite the prayer more quickly and louder than usual and they beat the drum vigorously. By the time they complete the prayer, they find they are calmer and less stressed about the situation.

Mr. Mori also admitted that when he becomes frustrated at work, often he drives to his parents' house to recite a prayer at his family *butsudan*. "During the five or ten minutes this takes," he explained, "I calm down and am able to think about the situation." He said that shrine visits are similar, "You enter through the sacred gates (*torii*) into a beautiful shrine, wash your hands, and pray. This is different from the flow of daily life, and this effects your mood." These rites become a stress reliever and make these individuals feel at peace with themselves and with others. Even within this small sample, it is apparent that *butsudan* rituals, especially, are tied to well-being because they provide individuals with serenity and act as stress moderators (see also Klass 1996; Morioka 1984; Offner 1979; Traphagan 2004).

In Japan, ancestor veneration and *kamidana* rituals are closely related to the well-being of those who enact these rites frequently. As previous scholars have indicated, these acts provide a designated sanctified (though not always "sacred") space to express concern, to receive and extend support, and to feel a sense of control. The act of prayer may also have healthful effects. The data from my sample support this research, and it

appears that individual wellness is also affected because for these individuals, 1) these rites are a vital part of their *habitus*, 2) they are able to maintain socially significant connections with departed loved ones, distant ancestors, *kami*, and buddhas, 3) they feel that others are watching over them, and 4) they gain a sense of peace and serenity. These actions are likely to generate positive outlooks on life and may buffer against the deleterious psychological and physiological effects of stress.[6]

HAVING A GRATEFUL *KOKORO*

The previous examples were limited to household rituals and to the informants I interviewed who regularly conduct these rites. During the interviews, a common theme that was repeated by many informants—regardless of religious practices, affiliation, or beliefs—was the importance of being grateful (cf. Kaneko 1990; Kawano 2005). In this section I discuss this sentiment and how it may be tied to well-being in Japan, because it appears to be a feeling that surpasses specific behaviors and beliefs and is prevalent in the religious traditions of many other societies as well.

For Mrs. Matsumoto (age 72), a Catholic and thus a religious minority in Japan, having a "grateful *kokoro* [*kansha na kokoro*]" is critical to her self-identity. In fact, she explained that she never makes requests to God for herself and that she only thanks God for the blessings in her life. Several times a week, Mrs. Matsumoto volunteers at an elderly home, and she prays with the staff and with the older men and women she helps. She says she tries to teach them to be grateful as well, though she admitted that she is not sure how well this message is followed. For her, being grateful is so important that she encourages others to live similarly, and she credits this moral value, in part, for her health and general well-being.

Another religious minority, Mr. Yamane, Sr. (54), is the branch head of a local chapter of Sôka Gakkai, a Japanese New Religion that boasts more than 12 million

members in 190 countries and territories throughout the world (Sôka Gakkai International). During our interview, he related several examples of how Gohonzon, the main deity of Sôka Gakkai, has saved his life in near-miss traffic accidents and his wife's life during the birth of their daughter. For these experiences, especially, he is admittedly grateful to Gohonzon.

Others, such as Mrs. Suzuki (82), spoke of "feelings of gratitude [*kansha na kimochi*]" towards *kami*, her ancestors, and to her "Sensei" (translated in this context as minister). Mrs. Suzuki is a member of the New Religion Konkôkyô, and everyday she walks a few blocks to the church to listen to the minister preach and to talk with other parishioners. Her faith is a combination of traditional Japanese practices and beliefs surrounding *kami* and *hotoke* and the specific doctrines of Konkôkyô. Unlike her husband, a self-admitted atheist, Mrs. Suzuki is very engaged in her religious community and the gratitude that stems from her practices and worldviews is one sentiment that is likely to positively affect her well-being.

For her husband (83), it is not religious rituals or beliefs that have made him grateful. Although Mr. Suzuki said that he was a member of the Zen sect, he does not believe in *kami* or buddhas. He explained that the constant death and seeming pointlessness of World War II that he personally experienced prevent him from placing faith in *kami* or buddhas even today. His affiliation with Zen is based strictly on the fact that he is responsible for caring for the tombs of twenty generations of ancestors who are buried at a nearby Zen temple. His family connections with this temple date back over 300 years, and he views his role as crucial to sustaining this tradition. His dedication to this duty is likely to explain why he feels grateful to his ancestors, and in particular to those who have recently died. Mr. Suzuki claimed that he is grateful for the "inheritance [*iden*]" they left him, and this includes much more than land and other forms of wealth.

For others in this sample, Shintô, Buddhist, or folk traditions or beliefs have generated feelings of gratitude. While some, such as Mr. Sakamoto, focus their attention on their ancestors, others are grateful towards *kami* and buddhas. Elsewhere (Roemer 2007) I have noted Mr. Kawabata's expressions of gratitude to his local *kami* (*ujigami*) when his oldest son passed the eye examination portion of a job application. Mr. Kawabata (often with his wife and two sons) made a 100-day pilgrimage to a neighborhood shrine to ask the *kami* to help his son pass the exam because his eyesight was just shy of 20/20 vision. When his son passed the exam, Mr. Kawabata and his family went up to the shrine and thanked the *kami* repeatedly. Experiences such as these and others have made him grateful for what—he believes—*kami* provide for him and for his family.

Mrs. Mori (40) and Mr. Tanizaki also feel grateful to *kami* and *hotoke*, and Mrs. Mori described her gratitude as a "custom of gratitude [*kansha na shûkan*]". Regular involvement in household and public rituals seems to have generated a sense of thankfulness to buddhas and *kami*. Mr. Endo described this sentiment in the following manner,

> "There are some who think that you should pray to *kami* to prevent misfortunes [*sainan*], and when things are going well, you should offer thanks. In that case, some think that it is only the *kami* to which you should be grateful. Others might feel that it is 'because of their ancestors' [*senzo no okage*], and this is tied in part to Buddhism and it also serves to bring order to the household."

For Mr. Endo, expressing gratitude towards *kami* and to one's ancestors is common in Japanese society and for him personally it is particularly important.

Based on these interviews, such feelings of gratefulness are associated with positive well-being because they promote a positive outlook on life and focus attention on good experiences. This appears to be the case for many, regardless of religious affiliation or the frequency or types of household and public rituals they conduct. Although some informants did not speak specifically about gratitude, only two—both Jôdo Shinshû members—denied feeling grateful towards mystical or divine beings. Based on their religious faith, it is *un*necessary to thank Amida Buddha (Amitabha), the main deity of this Buddhist sect, for occurrences in life. As Mr. Kano (67) explained, what happens in life is natural and does not require expressions of gratitude (or of disappointment) with Amida or with one's ancestors. None of the other informants shared this sentiment, however, and for most a grateful *kokoro*, feelings of gratitude, or customs of gratefulness are vital parts of their emotional, psychological, and physical well-being.

DISCUSSION

Overwhelmingly, research on the religion-health connection focuses on samples from predominantly Christian societies. In this chapter I have applied rational choice and religious coping theories to explain connections between Japanese religious practices and beliefs and well-being in times of uncertainty, trouble, or crisis. In Japan, people commonly conduct specific rituals at specific locations for specific needs. Generally, such actions are motivated by conscious or unconscious rational desires to maximize benefits on earth. Japanese also turn to certain rites to find meaning and to bring comfort as a means of coping with life's troubles. Based on the theory that Japanese religiousness is ultimately concerned with well-being, this chapter also reveals how Japanese rely on certain practices to maintain individual and communal wellness.

Another contribution of this chapter is that it employs a theoretical model and findings from in-depth interviews to address key mediating factors that demonstrate specific ways by which common household rituals may be related to well-being in Japan. My informants described how these rituals have become a vital part of their *habitus*, how they connect them to their ancestors, *kami*, or buddhas, how they make them feel protected, and how they give them peace of mind. I also explained the sense of gratitude that many informants expressed, regardless of religious affiliation or types of rituals practiced.

In addition to providing new theoretical and empirical support for the religion-health connection in Japan, this chapter is also beneficial for the broader examination of this topic of research. Previous studies have relied on theories that focus on social support networks (see Krause 2002b, 2006a), healthful behaviors (Idler 1994), stress buffers or reducers (Ellison 1994; Koenig 1999:104-130), meaning systems (Krause 2003; Park 2005; Reker 2000; Silberman 2005) and theodicies (Musick 2000) that are learned—mindfully or reflexively—from doctrines or theologies and tend to revolve around ideas of a caring omnipotent creator God. In this manner, religion, it is argued, can provide a "sense of coherence" (Antonovsky 1993) through support, activities, and ways of interpreting the world.

Religion is highly contextual, however (see Stark 1996), and Japanese religious traditions vary greatly from these mainly Christian models. The benefit of this study is that we can see some important similarities as well as examples of contradistinction. For instance, as my informants related, these rituals can buffer against or reduce stress, provide stability and routine and positive views about the world in terms of feelings of serenity and being watched over. Arguably, these lead to a sense of coherence or "order and predictability" (Antonovsky and Sagy 2001:114) that resemble that of the Christian

model on some levels. Important differences include the *types* of rituals performed (e.g., household rituals vs. church attendance), the *objects* of veneration or attention (e.g., ancestors, *kami*, buddhas vs. God), and the Japanese emphasis on *physical* rather than cognitive means to achieve or sustain well-being (e.g., ritual behaviors vs. doctrine-based reasoning or theological meanings).

By studying connections between religion and well-being in a variety of cultural contexts, we are able to generate a more comprehensive interpretation of the many ways in which these relationships may exist, and we are able to understand better the extent to which religious behaviors and beliefs may impact health—positively and negatively—throughout the world. No doubt, further research on this topic will reveal that religion may not be significantly correlated with health at all in some societies, and—as Chapter 4 indicates—practices that generate positive associations in one society may have reverse effects in others. For these reasons, it is imperative that we continue studying these interrelationships in a variety of contexts and societies.

It is also important to study these connections with different methods of research. A vast majority of the religion-health research uses large secondary datasets. The benefit of such studies is that they allow us to look for patterns that often can be generalized to a wide population. A major concern with this kind of research is that the dataset may lack key questions.

In this chapter, I relied on in-depth interviews to provide detailed examples of the religion-health relationship in Japan. The results from these discussions are intended to provide theoretical and empirical support for the rest of this dissertation. Though the sample for this chapter is relatively small, because I focused on household rituals that are commonly conducted throughout the country, it is highly plausible that the feelings of comfort, connectedness, protection, and solace my sample admitted to are experienced at

butsudan and *kamidana* throughout the country. Indeed, these results reinforce previous research, and a study that included individuals throughout Japan would likely support these new findings and reveal additional underlying mechanisms that have not yet been uncovered. Overall, the data from these interviews and the theoretical discussions of this chapter can help us understand *how* and *why* Japanese might turn to religious practices in times of need and *how* and *why* they conduct certain rites to maintain wellness in daily life.

ENDNOTES

[1] For several exceptions of non-Japanese scholars of Japanese religion who apply some of Weber's theories see Bellah (1985), Davis (1992), and Takayama (1998).

[2] Soteriological rewards, or those regarding salvation, are also important to some Japanese (see Fitzgerald 2003b); however, these are less frequently discussed in the literature, and none of my informants mentioned salvation.

[3] Nearly 54 percent of my sample of 333 Kyôto Prefecture residents reported owning *butsudan* and about 40 percent had *kamidana* (see Chapter 4).

[4] A typical example of a memorized prayer is the *nembutsu*—the repeated recitation of Amida Buddha's name. When said in earnest, this simple phrase is believed to provide the "immediate" expulsion of any wrongdoings to ensure one's well-being or the wellness of the person for whom one is praying (Reader and Tanabe 1998:99).

[5] See Lock (1982:222) for discussion of the relevance of the rhythm of life on mental health in Japan.

[6] See Krause et al. (2002) for example of how ritual behaviors and beliefs (including those associated ancestor veneration) are inversely correlated with hypertension after the recent death of a loved one among Japanese elderly.

Chapter 3: Religion, Life Satisfaction, and Happiness in Japan

In recent years, the number of publications concerning subjective well-being (SWB) has grown substantially. This development signifies an increasing recognition that research concerning individual well-being needs to include personal accounts as well as objective measures, such as socio-economic status and other environmental forces. SWB is a broad category that includes affective moods and emotions and global and specific aspects of life satisfaction (see e.g., Diener et al. 1999; Nieboer et al. 2005; Ormel et al. 1999; Updergraff, Gable, and Taylor 2004), and because it is *subjective*, SWB varies across individuals, contexts, and cultures (Hamada 2006; Suhail and Chaudhry 2004; Tsai, Miao, and Seppala 2007).

Scholars from the U.S., Europe, and Japan argue that life satisfaction and happiness are important 'social indicators' of life quality, and although they overlap, they are not identical concepts (for Japan, see Kosaka 2006; in the U.S., see e.g., Campbell, Converse, and Rodgers 1976; Land 1983). Life satisfaction is commonly defined as an evaluation of an individual's goals in comparison with her or his accomplishments, and it is considered a key *cognitive*, subjective measure of well-being (Campbell et al. 1976; Campbell 1981; George 1981; Keyes 2002; Ryff and Keyes 1995; Thomas and Holmes 1992). Comparatively, happiness is viewed as a less precise measurement of well-being than specific domains of life satisfaction, and it is generally interpreted as an *affective* measure that is more likely to fluctuate from day to day (Campbell 1981; Ryff and Keyes 1995). Satisfaction with different aspects of one's life is considered a long-term evaluation of well-being, whereas happiness tends to be viewed as more "transient" (Kosaka 2006:xii; see also George 1981; Keyes 2002; Ômura 2006). When examined together, we

are able to provide a more comprehensive understanding of both short- and long-term and cognitive and affective aspects of subjective well-being.

Among the many social influencers of life satisfaction and happiness, some of the most commonly cited are financial security or household income, self-reported or perceived health, and social participation (George 1981). In this chapter, I focus on the latter by examining how devotion to and affiliation with a religious organization are associated with life satisfaction and happiness among a random sample of Japanese adults.

Studies conducted in the U.S. have shown that organizational religious activities, such as regular attendance at religious services, membership, and other forms of voluntary participation, are often strongly and positively connected with life satisfaction (see e.g., Ellison and Gay 1990; Ellison, Gay, and Glass 1989; Krause 2004; Levin, Chatters, and Taylor 1995; Levin, Markides, and Ray 1996; Markides, Levin, and Ray 1987; Musick 2000) and happiness (Blazer and Palmore 1976; Gurin, Veroff, and Feld 1960; McCann 1962; Stack and Eshleman 1998) or both (Barkan and Greenwood 2003; Levin and Taylor 1998; Mackie and Brinkerhoff 1986; Reed 1991). Social support and integration, scholars argue, help explain these associations, and differences within the organizational structures and beliefs of certain denominations are also important (see Ellison 1991; Ellison and Gay 1990; Ellison et al. 1989; Gauthier et al. 2006; Mackie and Brinkerhoff 1986).

Other studies indicate that subjective religious measures also explain these relationships (see Duke and Johnson 1984; Koenig 1999:28-47; Krause 1993; Levin and Taylor 1998; Mackie and Brinkerhoff 1986). Strong devotion to a religion expressed via frequent private prayer or feelings of closeness to God are intrinsic examples of how individual religiousness can impact one's well-being (Koenig, Kvale, and Ferrel 1988), including life satisfaction and happiness (Ellison et al. 1989; Hadaway 1978; Levin and

Taylor 1998; Poloma and Pendleton 1991). In this case, viewing religion as a 'means' and an 'end' and devoting one's life to God above all seem to provide the faithful with important coping mechanisms against stressful situations, provide order in one's life, and make the individual feel important and nurtured.

Despite the contributions of these works, they are limited to largely Christian samples from the U.S. and findings are not always consistent (see e.g., Lewis and Cruise 2006). To extend this discussion, this chapter examines whether subjective and organized religiousness are associated with life satisfaction and happiness in a highly industrialized, democratic non-Western society that has a very small Christian population. Using the 2000-2003 Japanese General Social Surveys (JGSS), I explore relationships between religiousness and happiness and a five-item index of life satisfaction (self-reported satisfaction with one's leisure activities, neighborhood, friendships, family, and household budget). Although significant correlations exist, distinct differences concerning religious beliefs and practices lead us to question the mechanisms behind these relationships. In other words, despite cultural variances, does religiousness impact SWB similarly in the U.S. and in Japan?

In the preceding pages I cited a handful of publications that reveal how religious behaviors and beliefs in Japan are tied to well-being, and Chapter 2 provides new data to support these findings. To examine connections between religiosity and SWB, this chapter begins with an explanation of why the Japanese model is important for and relevant to this topic of research. Next, I describe the theories and hypotheses that have guided this study. Social support for affiliates of exclusive religions, certain coping devices, a sense of control in one's life, and an interpretation of Japanese religiousness as being ultimately concerned with well-being are some of the primary mechanisms that explain these links. After listing the secular and religious variables used in the models, I

illustrate and explain the results of this analysis. Finally, because the application of this study to Japan is unique, I elaborate on some of the implications of these findings and the need for further research concerning associations between religiousness and well-being in Japan and other non-Christian societies.

THEORETICAL EXPLANATIONS

There are several ways in which religion has been shown to positively affect life satisfaction and happiness in the U.S. Common theoretical explanations include social integration and support that stems from organized participation, beliefs systems and rituals that tend to vary somewhat by denomination, and "solace" (Ellison 1991:81) from private acts of worship and a close relationship with God. Additionally, religion may provide individuals with coping mechanisms that help them deal with life stressors (Pargament 1997) or an increased sense of control in life (Schieman, Nguyen, and Elliot 2003). Though these agents are interchangeable and often overlap and the extent to which they are applicable to Japanese religiousness is debatable (Traphagan 2005), there are certain basic characteristics that undoubtedly work in a similar manner in Japan, despite differences in rituals and beliefs.

The Japanese Context

As the previous two chapters revealed, there are some important differences between religiousness in Japan and in the United States. A few key distinctions that are highly relevant to this chapter are that, unlike the U.S., in Japan regular, frequent attendance at religious services, absolute faith in an omnipotent, creator God, and exclusive religious affiliation are rare. Focus is on ritual practices and—to a lesser extent—certain beliefs, and doctrines and theologies are not commonly well known or discussed among most Japanese (Kisala 2006). If religious affiliation, attendance, and even beliefs do

not matter much in Japan (see Reader 1991; Traphagan 2005), how is it possible to have an association between religiosity and subjective well-being?

Social Support

Although social support and integration provide one key explanation in U.S.-based research, support from religious communities is not likely to affect the average Japanese. As discussed previously, affiliation with a Shintô shrine or Buddhist temple is typically based on geography and heredity rather than on individual choice, and this connection is by no means exclusive. Consequently, most Japanese do not consider themselves members of any religious institution, and they will visit different shrines and temples throughout the year on an as-needed basis (cf. Reader and Tanabe 1998).

Furthermore, many religious practices are conducted privately, and there is rarely a sense of communal activity—beyond the family unit—when making offerings at one's home altars (e.g., *kamidana* or *butsudan*) or when visiting a shrine, for instance. Because Japanese tend not to view themselves as 'members' of a specific religion, few develop the kinds of relationships in Buddhist and Shintô religious settings that would yield the types of social support that U.S.-based studies have revealed. Such impacts are likely to be limited to members of some of the New Religions (see Miller 1992b) and to Christians (Morioka 1968), who tend to emphasize group closeness and exclusivity. For these men and women, social support from religious membership is likely to positively affect their SWB in similar manners as it does in the U.S.: via social integration and various forms of "objective" and "subjective" support (Ellison and Levin 1998:705).

Coping with Life's Troubles

A common theme of Japanese religiousness is to seek aid from *kami*, buddhas, and ancestors in times of distress. Concerning SWB, religion may act as a 'deterrent' to

prevent certain stressors or as a 'moderator' to help lessen the impact of a crisis (Ellison 1994; Pargament 1997). In both cases less (or lessened) stress is likely to be connected with more positive short- and long-term outlooks on life. In the Buddhist context, stress is interpreted as an example of 'suffering' (*dukkha*), and though it cannot be avoided, one should try to reduce this form of suffering. Meditation is one coping mechanism that many Buddhists use to diminish stress or buffer against its deleterious effects (Tyson and Pongruengphant 2007). It is important to note, though, that many Japanese are unaware of these Buddhist principles and few meditate on a regular basis as a means of dealing with stress.

As explained in Chapter 2, Japanese religiousness can provide meaning and comfort as well. Household rituals, different forms of worship and rites at shrines and temples, and beliefs concerning *kami*, buddhas, and ancestors play key roles in these predicted correlations, regardless of religious affiliation.

Sense of Control

Another way religion has been cited as affecting well-being is by providing the believer with a sense of mastery or personal control (Ellison 1993; Schieman et al. 2003). Sense of control is an essential component of psychological health in the U.S. (Mirowsky and Ross 2003), and it is likely to matter in Japan, too.[1] By participating in religious rituals in Japan, people are gaining a sense of mastery—albeit to varied degrees—over their own lives and that of their friends and family. In Japan, many feel that making regular offerings at one's home Shintô shrine (*kamidana*) or praying in front their ancestral altar (*butsudan*) are highly valued social "responsibilit[ies]" (Kawano 2005:22). These obligations are for the well-being of the family (both living and dead), thus they tend to be interpreted positively and they give the persons who enact the rituals a sense of control in the family's fate (see also Matthews 1996; Traphagan 2004).

Additionally, religious rites provide Japan's rapidly growing elderly population with a feeling of control over their last years on earth and in the afterlife. As Japanese grow older and closer to death, the relationship that women, in particular, establish with their ancestors evolves. Some feel as though they become one with their ancestors—even in life (Lebra 1984:289). Therefore, conducting the rites becomes more important and meaningful. Frequency of ancestor veneration in later life is also tied to knowledge of and intimacy with the dead. More than likely, it is the older household members who were closest to the most recently departed, and it is only natural, therefore, that they take on the responsibility of caring for him or her. Such an important role in the family provides the elderly with a sense of control in the corporeal and posthumous worlds. In the same manner that religious coping can give one a sense of meaning and comfort and positively affect one's outlook on life, sense of control from religious beliefs and actions can also impact life satisfaction and happiness in contemporary Japan.

Concerning religious affiliation, it is plausible that doctrines or theologies provide individuals with a "sense of coherence" (Antonovsky 1993) in their lives. Feelings of order and structure that stem from regular interactions with and support from coreligionists may make Japanese Buddhists, Christians, and New Religion affiliates feel a strong sense of control concerning this world and the next. They may come to believe that their behaviors and thoughts will impact their futures. Religions provide ways of interpreting the world, and it is possible that these frameworks give religious affiliates a sense of empowerment and place less emphasis on the uncontrollable nature of fate or destiny. The drawback to this explanation is that is assumes that the affiliates have a certain level of knowledge of their religion's doctrines. As self-reported affiliates, it is possible that they are more cognizant than non-affiliates; however, it is not possible to confirm this assumption with these data.

Ultimate Concern in Japanese Religiousness

Another important aspect of Japanese religiousness is the *maintenance* of well-being. The theory of ultimate concern is best characterized in Japan by an emphasis on well-being, both individual and communal. Rather than concern that focuses on the afterlife or specific mystical beings, Japanese religiosity is mainly about wellness in the human world. Physical and mental health are not the only aspects of well-being desired via religious rituals in Japan; although, they are central.

Another interpretation is that, for many Japanese, ritual behaviors provide 'embodied moral order,' and this structure centers on familial and societal well-being. According to Kawano (2005), the frequent performance of sacred acts, such as household rituals and shrine or temple visitations, reinforces social structures in daily life and maintains certain norms, such as social hierarchies, respect, and purity. Compared to other cultures, a key difference here is that it is a *physical embodiment* of ritual behaviors—rather than mental or conscious morals that stem from doctrines or theologies—that reflects concern for well-being. The religions of Japan (including New Religions and Christianity) tend to mirror this emphasis on physical embodiment, and are, therefore, likely to affect well-being in ways similar to rituals that are common throughout Japanese society. Even when life is not plagued by losses or illness, Japanese sustain certain practices and beliefs because they help provide tangible structure in life (Kawano 2005) and because the rites act as continual expressions of concern for the wellness of both the living and the dead (Traphagan 2004). What we can determine from these studies is that, for most, religious beliefs and behaviors in Japan are ultimately concerned with tangible goods or rewards on earth that are believed to help secure individual or collective well-being.

HYPOTHESES

The two main religion variables used in this chapter measure respondents' levels of devotion to a religion and whether they claim to be affiliates of a religious organization (Buddhist, New Religion, Christian, or Other). Based on the above theoretical discussion, I devised the following predictions:

Hypothesis 1: Devotion to a religion will be positively and significantly correlated with life satisfaction and with happiness.

In this chapter, I also compare the effects of religious affiliation on SWB. Although most Japanese are not well versed in the specific teachings of these religions, those who claim to be devoted are likely to know at least their religion's core messages. Of the three religious organizations studied here, fundamentally, Buddhism tends to focus more on the idea and inevitability of 'suffering' (*dukkha*). One of the founder's key tenets and the first of the Four Noble Truths is that life is suffering (see Tyson and Pongruengphant 2007). Although some argue that meditation practices and the examples of the Buddha and enlightened individuals are positively related with mental health (see Groth-Marnat 1992), most Japanese Buddhist doctrines tend to focus on *dukkha*, 'emptiness', and 'nothingness' and a detachment from this-worldly benefits rather than emphasize personal well-being on earth. The primary messages from most Japanese Christian churches and from many New Religions, on the other hand, tend to be more about seeking and recognizing positive well-being, including satisfaction and happiness in life and in the afterlife (see e.g., Mullins 1998; Shimazono 2004). Like Buddhists, Christians and New Religion members also recognize that sorrow is inevitable; however, they tend to place less emphasis on this theme. Based on these interpretations I hypothesized:

Hypothesis 2: Compared to Buddhists, those who believe in new or Christian religions will report higher levels of happiness and life satisfaction.

DATA AND MEASUREMENT

Data

Data for this study come from a combination of the 2000-2003 Japanese General Social Surveys (JGSS). The following table (3.1) provides the ranges, means or percentages, standard deviations, and total number of valid responses for each of the predictor and outcome variables.

Table 3.1: Description of Key Variables.

	Range	Mean or %	S.D.	N
Life Satisfaction	0-20	12.11	3.83	11,978
0-4 (Dissatisfied)		1.74%		
5-10		36.27%		
11-15		42.84%		
16-20 (Satisfied)		19.15%		
Happiness	1-5	3.83	.959	10,543
Unhappy		1.32%		
		5.31%		
		32.32%		
		31.53%		
Happy		29.52%		
Secular Variables				
Sex (Female = 1)	0,1	54.80%	.498	12,299
Age	20-89	52.00	16.64	12,299
Education	6-16	11.96	2.66	12,213
Household Income	1-19 (US$0-200,000 or more)	9.71	2.96	12,299
Unemployed	0,1	2.10%	.143	12,146
Married	0,1	73.45%	.441	12,299
Children	0,1	78.99%	.407	12,273
Hobbies	0,1	15.69%	.364	11,877
Traumas	0,1	24.58%	.431	12,251
Health	1-5	3.47	1.16	12,260
Low Class	0,1	40.08%	.490	12,144
Year 2000	0,1	23.52%	.424	12,299
Year 2001	0,1	22.68%	.419	12,299
Year 2002	0,1	24.01%	.427	12,299
Year 2003 (Reference)	0,1	29.78%	.457	12,299
Religion Variables				
Religious Devotion	0-3	.402	.730	12,202
Buddhist (Reference)	0,1	4.32%	.203	10,195
New Religion	0,1	3.19%	.277	10,195
Christian	0,1	.84%	.094	10,195
Other	0,1	.98%	.099	10,195

(SOURCE: JGSS 2000-2003)

Subjective Well-Being

Life satisfaction is measured in terms of each respondent's summarized responses to satisfaction with leisure activities, family life, friendships, household income, and the area in which he or she lives (Crombach's $\alpha = .80$).[2] Each item ranges from 0 (dissatisfied, or *fuman*) to 4 (satisfied, or *manzoku*), for an index range of 0 to 20. I assessed relationships with this SWB measure using OLS regression analyses. Happiness is measured by a single item question that ranges from 1 (unhappy, *fushiawase*) to 5 (happy, *shiawase*).[3] For this outcome I used ordered logistic regressions to examine relevant correlates.

Secular Variables

All of the models include a standardized weight variable for these data and the socio-demographic variables Sex (female = 1), Age (in years), Education (in years [6-16]), and Household income (continuous imputed in about $10,000s—converted from Yen; US$1 = ¥110), and controls for each year (2003 is the reference category). All models also include dummy variables for unemployed (working, retired, student, housewife/husband, or other is coded 0; unemployed is coded 1), marital status (0 = not married, divorced, or widowed; 1 = married), parental status (1 = one or more child), hobby group or club membership (1 = yes) and whether respondents had experienced one or more traumatic events in the past five years (1 = one or more), such as "divorce, unemployment, hospitalization, disabilities, death of someone close to you." Two subjective controls are self-reported 'health condition' (bad = 1, good = 5) and a dummy variable for 'low class' (1 = lower middle or lower class; 0 = middle to upper). As in Chapter 1, except for income, missing values were deleted using list-wise deletion for both dependent and independent variables.

Religion Variables

The JGSS ask each respondent, "Do you have a religion you believe in?" (*shinkô shite iru shûkyô wa arimasu ka?*). Answer categories are, "yes", "I don't really believe [in one], but I have a household religion" (*toku ni shinkô site inai ga, ie no shûkyô wa aru*), and "no". Of these three options, 'yes' is the only one that indicates current personal or individual affiliation with a religion, and I limit my analysis in this chapter to this measure. Respondents who selected 'yes' are asked to write in the name of the religion. To generate sample sizes of these religions that are substantial enough to examine statistically, I combined these responses from four consecutive years of cross-sectional data into four major religion categories: Buddhism (the religion control variable), New Religions, Christianity, and Other (for specific coding see Chapter 1). The number of respondents who claimed belief in Shintô (n=20) is too small to analyze separately here, so those individuals are included in the 'Other' religion category. Each category is a combination of all of the Buddhist, New Religion, and Christian sects, denominations, and religions, respectively, and I admit that this results in certain assumptions that may cause bias in the results (see Chapter 1 for a more detailed discussion). In other words, the Buddhist sects listed in the JGSS are not identical, and differences between these sects are ignored by lumping them together this way. On the other hand, by themselves there are too few respondents to perform statistical analyses, and contrasts between these four primary categories (including Other) are measurable.

Table 3.1 illustrates that the combined total of respondents who claimed personal affiliation with a Buddhist sect, New Religion, Christianity, or other religion in these data consists of 9.33 percent (n = 951) of the total number of valid responses to this question (N = 10,195). Over 46 percent (440 respondents) of these four religion categories are Buddhists, though they consist of only 4.32 percent of the total sample. Next, there are

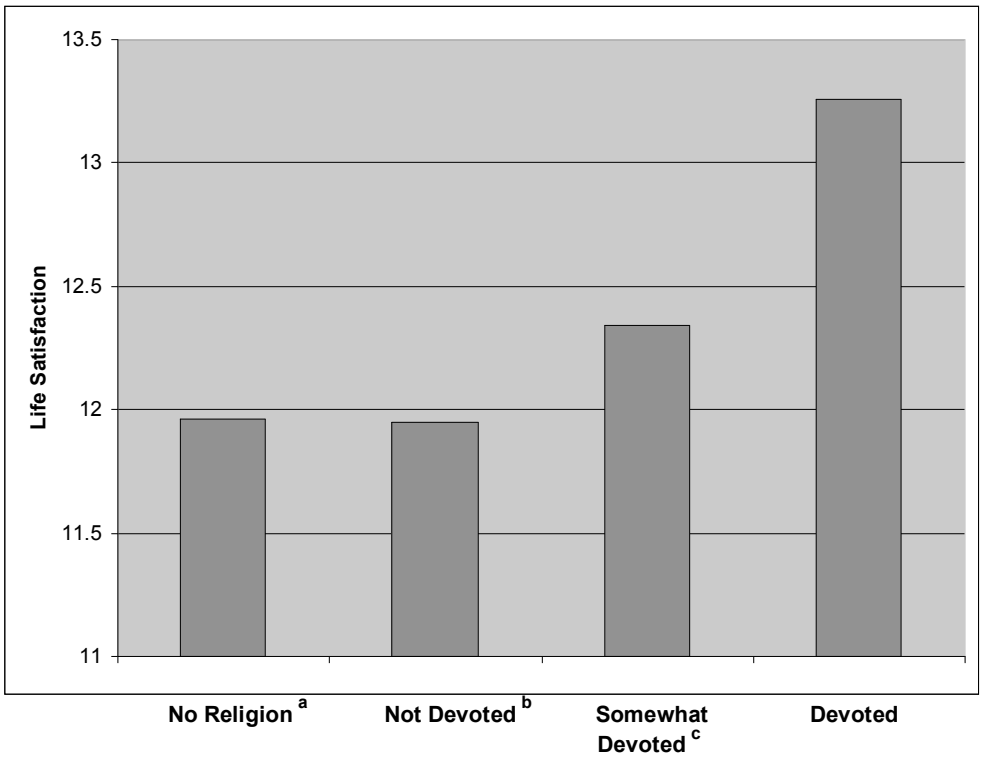
325 (3.19%) New Religion members, 86 (0.84%) Christians, and 100 respondents (0.98%) who I categorized as 'Other' religions. The vast majority of the sample (89.79 percent) maintained that they do not have a religion in which they *personally* believe.

Respondents who selected that they have a religion are also asked to report their degree of devotion to that religion. Answer categories are "devoted (*nesshin de aru*)", "devoted to a degree (*maa maa nesshin de aru*)", and "not very devoted (*sonna ni nesshin de wa nai*)", and I included those who answered 'no' to the first question on belief in a religion as a fourth group to represent those who are not at all devoted. I created an ordinal variable to measure degree of religious devotion (0 = respondents who do not consider themselves religious affiliates at all; 1 = "not very devoted"; 2 = "devoted to a degree"; 3 = "devoted"). Results for both life satisfaction and happiness outcome measures do not differ significantly when dichotomizing the devotion variable as a devoted and devoted to a degree as 1 and the other respondents as zero or only the highest level of devotion as 1 and the rest as zero (results available upon request). Only 238 individuals (2.52%) of the sample identified themselves as "devoted".

RESULTS

By way of illustration, Figure 3.1 demonstrates the association between mean scores of degrees of religious devotion and life satisfaction. Net of the socio-demographic and other controls, it is apparent that the Devoted are significantly more likely to report greater satisfaction with life than all other respondents ($p < .001$). These results also reveal important distinctions between those who claim No religion and the Somewhat devoted ($p = .002$) and the Not devoted and the Somewhat devoted ($p = .003$).

Figure 3.1: Mean Scores for Religious Devotion on Life Satisfaction



Notes:
[a] No Religion significantly different from Somewhat Devoted ($p < .01$) and Devoted ($p < .001$)
[b] Not Devoted significantly different from Somewhat Devoted ($p < .01$) and Devoted ($p < .001$)
[c] Somewhat Devoted significantly different from Devoted ($p < .001$)

To assess relationships between *life satisfaction* and the religion and control variables, I ran OLS regressions. Only statistically significant relationships are shown in the tables to conserve space, though the analyses include the full model with all controls. The results presented in Table 3.2 support Hypothesis 1 because, as the above figure indicates, devotion is positively correlated with life satisfaction (Beta = .05, $p < .001$). A comparison of the standardized coefficients (Betas) demonstrates that the effects of devotion on life satisfaction are noteworthy yet comparatively modest.

Table 3.2: OLS Coefficients and Standardized Estimates for Regression of Life Satisfaction.

	Model 1		Model 2	
	b	Beta	*b*	Beta
Devotion	.26***	.05	--	--
	(.05)			
Christian	--	--	.76*	.02
			(.38)	
Age	.03***	.12	.03***	.13
	(.00)		(.00)	
Income	.08***	.07	.09***	.07
	(.01)		(.01)	
Health	1.02***	.31	1.02***	.31
	(.03)		(.03)	
Hobbies	.61***	.06	.63***	.06
	(.10)		(.10)	
Low class	-1.58***	-.21	-1.59***	-.21
	(.05)		(.08)	
Married	-.35***	-.04	-.37***	-.04
	(.10)		(.10)	
Children	-.36**	-.04	-.36**	-.04
	(.12)		(.12)	
Unemployed	-.64**	-.02	-.63**	-.02
	(.24)		(.24)	
Intercept	7.40***	--	7.32***	--
	(.35)		(.35)	
Adj. R^2	.192		.190	

Notes: N = 9,305
Models 1 and 2 include controls for sex, education, income_miss, traumas, and years 2000, 2001, and 2002 (2003 is the reference year). Model 2 also includes New Religion and Other Religions (Buddhism is the reference category).
b Unstandardized coefficient (standard error)
Beta Standardized coefficient
*p<.05, **p<.01, ***p<.001 (two-tailed test)

In Model 2 of Table 3.2, I tested for the effects of religious affiliation on life satisfaction, and these results reveal that, compared to Buddhists (the reference category), only Christians are significantly—though marginally (Beta = .02, p = .044)—correlated

with this measure of subjective well-being. New religion affiliation is slightly above of the $p < .05$ level ($p = .067$) so it is not included in the table. These findings provide partial support for Hypothesis 2: Christianity is comparatively correlated; however, New Religion affiliation in these data is not strongly associated with life satisfaction.

In both models, the top three predictors of life satisfaction based on the standardized coefficients are self-reported health condition (Betas = .31, $p < .001$), low class status (Betas = -.21, $p < .001$), and age (Betas = .12, .13, $p < .001$), and household income is another positive predictor (Betas = .07, $p < .001$). As previously mentioned, self-reported health and financial security are two common predictors of life satisfaction in studies on U.S. populations, and it is not surprising to find similar effects in Japan. Most of these U.S. publications focus on older populations, however, and the authors are unable to compare the effects of age to the extent that the JGSS allows because it is includes a wider range of ages (20 to 89). As is always the case with cross-sectional data, though, we cannot tell from these results if age—or the other variables, for that matter—is causally linked with life satisfaction.

To augment this discussion, I added four age categories in a separate model (not shown here), and these separate analyses revealed curvilinear relationships between the age groups for both life satisfaction and happiness measures. The youngest (ages 20-34) and oldest (65 and older) categories had the highest mean scores on both outcomes and the two middle (35-49 and 50-64) groups' scores were comparatively lower.

To test the stress-buffering hypothesis in the Japanese context, I added to these models interactions between religious devotion and Low class, Unemployed, and Traumas; however, these cross-products were insignificantly related to both SWB outcomes. It is arguable that because religious devotion in these data is more about *belief*

than *practice* it does not buffer against the deleterious health effects of these deprivation measures in Japan.[4]

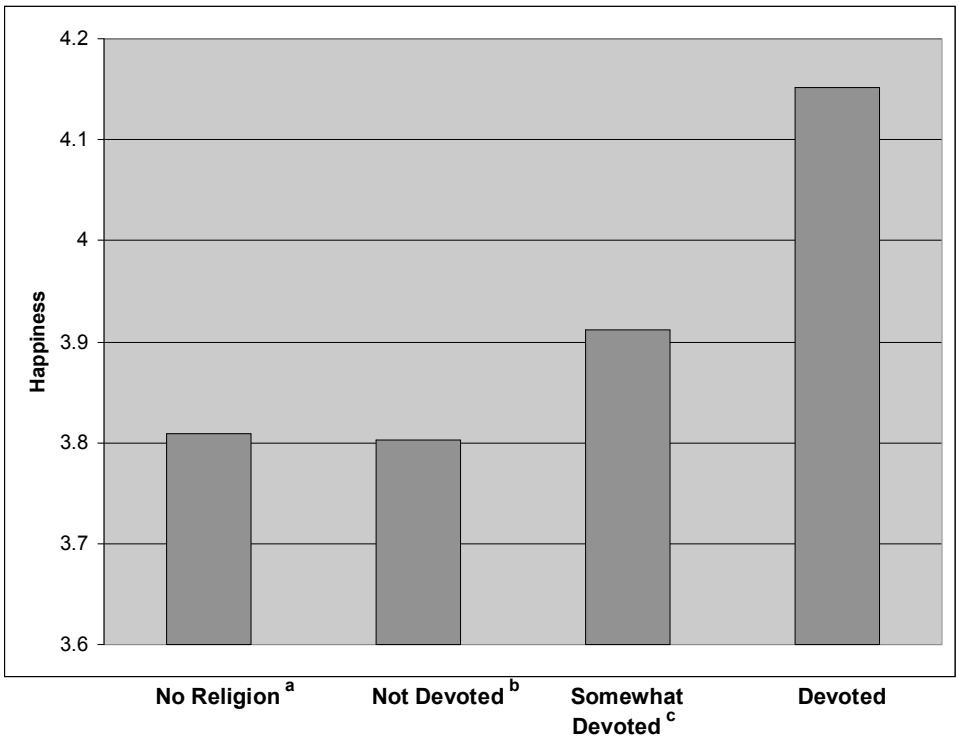
Another positive, statistically significant correlate with life satisfaction is hobby participation (Betas = .06, $p < .001$). Such activities are generally socially engaging—an important component of well-being in Japan (Traphagan 2004), so this outcome is predictable, and similar results have been found with U.S. populations. Also as expected, being unemployed is negatively connected with life satisfaction (Betas = -.02, $p = .008$, .010) and though having experienced one or more traumatic events in the past five years is negatively associated it is not statistically significant.

Somewhat surprisingly, being married and having children are both negative and highly significant in both models. In U.S.-based studies, marriage is commonly associated with positive well-being (especially for men), so this finding was unexpected. One could argue that the Japanese traditional emphasis on arranged marriages or marriages that are based on practicality rather than love or close friendship, per se, explain this finding in part (see Lebra 1984). As for parental status, the average age of the respondents with children is 44. For many of these individuals, their children are likely to be teenagers or young adults, and may cause their parents more stress than much younger or much older children. For older adults, children—in particular daughters-in-law (see Rosenberger 2001)—tend to provide daily care for these respondents and, hypothetically at least, would offer comfort and support for them. These pejorative associations are not immediately clear. Unfortunately, a thorough discussion of these results is beyond the scope of this dissertation.

To explore the effects of religious devotion on *happiness*, I repeated the same steps as in the life satisfaction analysis. First, Figure 3.2 reveals a pattern similar to the figure above: there is a linear pattern concerning the means scores of levels of devotion on

happiness. The figure also shows that the Devoted are significantly different from all other respondents ($p < .001$). Also like the life satisfaction analysis, the Somewhat devoted differ substantially from the others ($p < .01$).

Figure 3.2: Mean Scores for Religious Devotion on Happiness



Notes:
[a] No Religion significantly different from Somewhat Devoted ($p < .01$) and Devoted ($p < .001$)
[b] Not Devoted significantly different from Somewhat Devoted ($p < .01$) and Devoted ($p < .001$)
[c] Somewhat Devoted significantly different from Devoted ($p < .001$)

The next table (Table 3.3) employs ordered logistic regression analyses to examine correlates of *happiness*. Once again, only significant associations are shown, and these data reveal strong, positive connections between religious devotion and SWB. The first noteworthy finding in Model 1 is that devotion is positively correlated with happiness,

indicating that the devoted are significantly more likely to be happy than those who are less devoted (OR = 1.16, $p < .001$).

Table 3.3: Ordered Logistic Regression Coefficients and Odds Ratios for Predicting Happiness.

	Model 1		Model 2	
	b	OR	*b*	OR
Devout	.15***	1.16	--	--
	(.03)			
New Religion	--	--	.22*	1.25
			(.11)	
Christian	--	--	.48*	1.62
			(.21)	
Female	.21***	1.24	.21***	1.24
	(.04)		(.04)	
Income	.02**	1.02	.02**	1.02
	(.01)		(.01)	
Health	.46***	1.59	.46***	1.58
	(.02)		(.02)	
Hobby	.16**	1.17	.17**	1.19
	(.06)		(.06)	
Low class	-.72***	.49	-.73***	.48
	(.04)		(.04)	
Married	.65***	1.93	.65***	1.91
	(.05)		(.05)	
Unemployed	-.80***	.45	-.79***	.45
	(.13)		(.13)	
Max-rescaled R^2	.185		.183	
-2 Log Likelihood	23,654.11		23,673.89	
LR χ^2 (df)	1,789.92*** (16)		1,770.149*** (18)	

Notes: N = 9,457
Model 1 includes the same controls as in Table 3.2 Model 1.
Model 2 includes the same controls as in Table 3.2 Model 2.
b Unstandardized coefficient (standard error)
OR Odds Ratio
*p<.05, **p<.01, ***p<.001 (two-tailed test)

The findings from Model 2 differ from those of Table 3.1 slightly because affiliation with *both* New Religions and Christianity are significantly related here. Although marginally associated, individuals who claimed to believe in a New Religion are 25 percent more likely than Buddhists to report that they are happy (OR = 1.25, p = .044), and Christians are 62 percent more likely (OR = 1.62, p = .020), net of the controls. It is plausible that the effects of New Religion affiliation on SWB differ because—in comparison to Buddhists—these affiliates place greater weight on short-term or day-to-day happiness than more global or long-term dimensions of well-being, such as life satisfaction.

Other consistent positive predictors of happiness include self-reported health, participation in hobbies, and income, and low class and unemployment are negatively associated. Interestingly, age is not significantly correlated (as it is with life satisfaction), but gender matters. Females are approximately 24 percent more likely than males to report that they are happy in both models (ORs = 1.24, $p < .001$). It is not clear why gender makes a difference concerning the happiness outcome and not with life satisfaction. Another finding that differs per SWB measure is marital status. As the models in Table 3.3 indicate, married individuals are positively associated with happiness (ORs = 1.93, 1.91, $p < .001$), though they are negatively associated with life satisfaction.

For the most part, results of these models indicate overlapping correlations between life satisfaction and happiness and the independent variables. Differences concerning the effects of religious affiliation, age, gender, and marital status, however, provide support for the interpretation that life satisfaction and happiness are not identical measures of subjective well-being in Japan. Although they are both important, their impacts differ, and further research is needed to clarify these distinctions.

DISCUSSION

The objective of this study was to examine connections between individual religiousness and subjective well-being in an East Asian society in which religious traditions differ greatly from those of the U.S. In the past few decades, scholars have revealed that various dimensions of religiousness can positively impact SWB among U.S. populations. These works offer important theoretical explanations and empirical support for this topic of research. Nonetheless, religious and other social differences should lead us to question the applicability of findings from one culture to another. As presented here, there are theoretical reasons to believe that these relationships may exist outside of predominantly Christian societies, and based on the findings presented in this chapter, subjective religiousness (i.e., degree of devotion to a religion) is positively associated with life satisfaction and happiness in Japan. My analyses also show that there are different religious organizational effects on quality of life. Compared to Buddhists, Christians are more likely to be happy and to be satisfied with life, and New Religion affiliates have significantly higher odds of being happy.

Concerning the relationships between religious devotion and SWB in Japan, it is highly likely that there is a combination of mechanisms involved. For example, these "devoted believers" may find spiritual solace and support from their ancestors, *kami*, and buddhas. This is the case for almost all Japanese Buddhists and most New Religion affiliates. Although some Japanese Christians may also gain comfort from more than one god or supernatural being (see Mullins 1998), the underlying mechanisms that explain the connections for this group are quite likely to resemble those of Christian samples in U.S.-based research. As I argued, this spiritual coping device, in conjunction with the sense of mastery that stems from frequent ritual participation in the household or in religious organizational settings and beliefs and rites that center on individual and collective well-

being, provide several key explanations for how religion and well-being intersect in Japan. Additionally, it is likely that affiliation with the more exclusive New Religions and Christian denominations in Japan provide these individuals with social integration and support systems that positively affect their well-being.

It is also important to mention the influence of doctrines or theologies in this context. Japanese who believe in a religion are much more likely than those who do not to have knowledge of the teachings of these institutions. Buddhism, New Religions, and Christianity in Japan all espouse belief systems, and they tend to have positive messages about the world. Indeed, many Japan scholars have argued that the focus of "Japanese religion" is this-worldly goods (*genze riyaku*), and this includes well-being (see Reader and Tanabe 1998). The data here indicate religious differences in terms of SWB, and of the three religions studied, at its core Buddhism focuses more on life's hardships than the other religions, and it emphasizes suffering as inescapable (Tyson and Pongruengphant 2007). Another explanation is that because Japanese Buddhists are less "ego-centered" (Nishitani 2006:79), they may be less likely than Christians and New Religion members to be concerned with their individual well-being and, thus, interpret the questions differently and report lower SWB scores. There is a substantial divide concerning doctrines and theologies of religious organizations and common knowledge of these notions, and we cannot tell from these data how influential they are for these respondents. We do know that the teachings of most Japanese Christian and New Religions are, generally, positive, and these findings reveal that their affiliates rate personal happiness and satisfaction in life higher than Buddhists do.

In addition to deepening our understanding of how religious affiliation is connected to SWB, this chapter also presents new data concerning Japanese SWB in general. It is one of the only studies that addresses this topic in English (see Schumaker et al. 1993),

and similar to U.S.-based research, both subjective and objective measures of financial security and self-reported health have significant ties with SWB in Japan. Additionally, these analyses illustrate differences concerning predictors of life satisfaction and happiness. Such distinctions support arguments that life satisfaction and happiness are not identical constructs and should be examined separately—in the U.S. and elsewhere.

Overall, this chapter reveals important connections between religion and well-being in Japan. By conducting more research on intersections between religiousness and well-being in cultures where religious traditions vary greatly from monotheistic, exclusivist models, we will be able to develop a more comprehensive and cross-cultural understanding of the mechanisms involved in these relationships. The religion-health connection is an important area of research, and studies continue to show strong positive (and negative) correlations. Until we can include more studies outside of the U.S. on societies that have different religious practices, beliefs, and expressions, though, our knowledge of some of the underlying forces remains incomplete. This study aims to help fill that gap by focusing on two core dimensions of subjective well-being in Japan.

ENDNOTES

[1] Although Sastry and Ross (1998) found that sense of control for Asians (Chinese, Indians, South Koreans, and Japanese) and Asian Americans is less impacting on psychological distress in comparison to Western nations, they did not analyze Japan separately. Furthermore, their study suggests that control is only comparatively less impacting for Asians than non-Asians—control still matters to a degree. The next chapter supports the findings of Sastry and Ross, but it is still unclear whether sense of control matters for subjective (this chapter) or more general aspects (Chapter 2) of well-being in Japan.

[2] I do not include the Health satisfaction variable because self-reported 'health condition' is used as a control variable in all models. I also chose not to include Job satisfaction in this index because it greatly reduced the sample size and did not improve the alpha score.

[3] The term *shiawase* (happiness) is considered to be a more appropriate word than others more commonly used by social scientists, such as *kôfuku*. The preference for the former is because it is a more colloquial term and, thus, more appropriate for a survey of the general population (see Ômura 2006:152). *Shiawase* shares some overlap with the word *manzoku* (satisfaction), but—as the findings reveal—they are not identical terms in Japanese.

[4] Small sub-samples of Christians and 'Others' who were "devoted" prevented comparisons of interactions between these religions and levels of religious devotion. Results of these and other additional analyses are available from the author upon request.

Chapter 4: Religiosity and Psychological Distress in Japan

For decades, scholars have discussed the importance of connections between religion and psychological distress. With the exception of a few studies, this research is limited overwhelmingly to Christian samples in the U.S., and we cannot tell the extent to which religious or other culturally specific forces explain these relationships. In other words, are there links between religion and psychological distress in societies that are not predominantly Christian, and do these associations exist in non-Western countries?

To address these questions, this chapter examines correlations between several dimensions of religiousness and psychological distress among Japanese adults. On the surface, the U.S. and Japan share similar economic and political practices, yet even these characteristics differ. Religion is one cultural example that varies from Japan to the U.S. substantially. For instance, less than two percent of the Japanese population is Christian. In fact, few Japanese claim religious membership or affiliation with any organized religion (see Chapter 1), and regular attendance at places of worship is rare. Another important distinction is that religiousness in Japan is best characterized by action and ritual, rather than doctrine-influenced belief systems (see Reader 1991; Traphagan 2005). Although beliefs in *kami*, buddhas, and other mystical beings exist and influence many Japanese, most religious expressions are exemplified by household rituals and less frequent acts, such as shrine or temple visits, festivals, and annual holiday rites and activities.

Another reason the present study is important is because the topic of Japanese psychological distress, or poor mental health, has received little attention in the social sciences. For many years, all mental health disorders were considered extremely private matters of the household and few families were willing to discuss a relative's mental state or seek treatment from a psychologist or physician. Until quite recently, most studies on

mental health in Japan were limited to qualitative research methods, such as historical analyses and observations (see e.g., Lock 1980; Matsunaga 2000; Sonoda 1988). In a recent ethnographic study, Japanese sociologist Yuko Kawanishi describes how many informants in her Japanese and U.S. samples joined religious organizations or increased their faith in the supernatural as a result of mental illness (2006). Most studies on this topic pay very little attention to the effects of religious practices and beliefs, however.

In the past decade, a number of scholars from Japan and abroad have begun using a Japanese version of the Center for Epidemiological Studies Depression Scale (CES-D) to examine connections between mental health and social forces via survey research. In the U.S., this scale has been shown to be a valid and reliable instrument for assessing psychological distress. Indeed, some argue that indexes such as the CES-D Scale are more capable of recognizing the kinds and gravity of depression symptoms than dichotomous measures or diagnostic categories, such as the Diagnostic and Statistical Manual of Disorders (see Mirowsky and Ross 2002). Scholars have found that the Japanese translation also has good psychometric properties (see e.g., Iwata and Roberts 1996; Kikuzawa 2001).

For this study, I use a 10-item index from the Japanese CES-D Scale to examine connections between psychological distress and several key measures of religiousness among Japanese adults. The findings reveal both positive and negative correlations, and they expose some cultural differences concerning these links. For these reasons, Japan makes an important setting in which to test some the theories and results from previous research.

Although there are hundreds of studies that have examined links between religion and health in general, for the most part they are limited to U.S. samples (see Koenig, McCullough, and Larson 2001). There is a handful of survey-based research on the

religion-health relationship in Japan, yet most of these focus on older Japanese, they use a limited number of religion questions, and they do not discuss mental health (see e.g., Krause et al. 1999b; Krause et al. 2002; Tagaya et al. 2000). A few other studies offer more in-depth qualitative examples (e.g., Kawano 2005; Ohnuki-Tierney 1984; Roemer 2007; Traphagan 2004). Despite their theoretical and empirical advancements, these latter publications focus on general well-being and tend to be limited somewhat to small communities in Japan. For this chapter, I used data from a survey I designed and administered in 2007 to a random sample of Japanese adults living in Kyôto Prefecture. The survey contains a number of religion questions and the Japanese version of the CES-D Scale. This chapter is unique in its application of this topic of research within the Japanese context. Given the influence of mental health studies in the religion-health literature, it is important for us to examine these associations in a non-Western society that is not predominantly Christian.

This chapter begins with a description of some of the previous religion-mental health research. The following section is a discussion of three theoretical approaches—religious coping, activity theory, and worldviews, and I assess the applicability of these explanations in the Japanese context. After describing the analytical methods and data employed for this study, I report findings from multivariate analyses of religiousness on CES-D symptoms. Ultimately, I found 1) ties between religious coping and psychological distress, 2) strong positive and negative connections between ownership of household altars (*butsudan* and *kamidana*) and psychological distress, 3) correlations between certain beliefs and distress, and 4) a few statistical differences between religious identification concerning CES-D symptoms. Finally, I conclude with a discussion of these findings and address limitations and contributions of this study.

RELIGIOSITY AND PSYCHOLOGICAL DISTRESS

As early as the 1960s, social scientists began using secondary data to explore the extent to which religious value systems, social support networks, and attendance, for example, could be associated with better mental health (e.g., Gurin, Veroff, and Feld 1960). Richard McCann (1962) dedicated an entire volume of the Joint Commission on Mental Illness and Health Monograph Series to this relationship, and he used interview data to examine how clergy and lay members could play important roles in the administration of aid to community members with mental health problems—from serious to relatively minor. In the late 1960s, the Group for the Advancement of Psychiatry (1968) compiled an overview of much of the research that psychologists had conducted. For the most part, these studies reported that religious practices and beliefs were associated with positive mental health, and scholars explained that many individuals rely on their religiosity to cope with life's stressors.

Results of more recent research on the religion-mental health relationship indicate that different dimensions of religion have mixed effects (for reviews see Ellison and Levin 1998; Koenig 1991, 1999; Levin and Koenig 2005). One relatively consistent finding is that public and intrinsic forms of religiousness are negatively correlated with psychological distress. For example, Ellen Idler (1994) found that frequent public religious practices (e.g., church attendance and involvement in other church-related activities) among adult Americans are highly related with lower depression levels (see also e.g., Ellison et al. 2001; Ferraro 1998; Idler and Kasl 1997; Latkin and Curry 2003; Loewenthal 2007; Wilson and Musick 1999). Harker (2001) found similar connections between church attendance and distress (based on the CES-D Scale) among U.S. immigrant youth. Outside of the U.S., Braam and colleagues (2004) used the same measure in a longitudinal study of 1,840 older Dutch citizens and discovered that frequent

religious attendance is negatively associated with depressive symptoms over time. Although there are a few exceptions (e.g., Schnittker 2001), most studies have found that public practices, especially church attendance, are linked negatively with psychological distress.

Additionally, a number of studies have shown that intrinsic religiousness, or deeply embedded religious devotion (see Batson, Shoenrade, and Ventis 1993), is consistently and significantly correlated with lower levels of depressive symptoms (see e.g., Genia 1996; Moberg 2001; Plante and Sharma 2001). Koenig and colleagues discovered that intrinsic religiosity was "one of the most important factors in [the] speed of recovery" for 87 mental health patients, even after controlling for a number of possible confounding variables (Koenig 1999:151). In a longitudinal study, Wink, Dillon, and Larsen (2005) found that older adults for whom religion is "central" are more likely to benefit overtime from the buffering effects of religion on depression connected to poor physical health. In a cross-cultural study, Watson et al. (2002) compared findings among American and Iranian college students and revealed that intrinsically motivated religious individuals of both nationalities had fewer depressive symptoms when compared to those who were not intrinsically religious (see also Tapanya, Nicki, and Jarusawad 1997).

There are also a few studies that reveal curvilinear associations between religiousness and psychological health. For example, in a community sample of 401 adults from the Chicago area, Ross (1990) found that both those for whom religious affiliation was very important and those who claimed no religious affiliation were less likely to report symptoms of depression and anxiety. Using a larger sample of adults from throughout the U.S., Schnittker (2001) reported a similar U-shaped relationship but in the opposite direction. His longitudinal analysis revealed that individuals who rated their religious beliefs as very important and not at all important were significantly *more* likely

than those who fell in between to indicate signs of psychological distress based on the CES-D Scale.

Other studies that have noted relationships between religiousness and psychological distress include the aforementioned paper by Watson and colleagues' (2002). They found that those who were motivated by extrinsic religious actions and beliefs (generally, this-worldly, goal-oriented, and less an everyday part of life) were more likely than intrinsically religious students to be depressed. Also, Genia (1996) reached similar conclusions with a smaller sample of 211 U.S. college students. In the latter study, extrinsically religious students were much more likely to report higher depressive symptoms based on the Beck Depression Inventory. In a study of Thai Buddhists and Canadian Christians, Tapanya, Nicki, and Jarusawad (1997) found that extrinsic religiousness was correlated with higher levels of anxiety for Buddhists but not for Christians. Other examples include Brown and colleagues' (1992) study of urban African Americans. They reported that a multi-item index of religiosity was positively connected with depression for those who were suffering from chronic economic strains.

Other works that examine positive associations between religiousness and psychological distress focus on negative relationships within a religious community and religious doubt. Krause, Ellison, and Wulff (1998), for instance, discovered that negative interactions with co-religionists were more harmful for the psychological health of clergy and elders within their sample of Presbyterians, as compared to 'rank-and-file' members. Overall, their paper reveals potential health risks of leaders in a religious community who are experiencing stressful relationships within that group (see also Krause et al. 1999a). Krause and Wulff (2005) also found that religious doubt is highly correlated with Depressed Affect and Somatic Symptoms of Depression. In a subsequent study, however, Krause (2006b) concluded that, among older U.S. adults, a post-secondary

education buffers the deleterious effects of religious doubt on psychological distress overtime.

Taken together, these studies indicate the complex nature of relationships between religiousness and psychological distress. It is also apparent that more research is needed to understand links between religion and mental health in societies that are not predominantly Christian. This chapter addresses this limitation by using new data to examine correlations between several religious measures and psychological distress in Japan.

THEORETICAL CONSIDERATIONS

Previous studies on the religion-mental health relationship provide us with a number of explanations for these connections. For example, Idler (1994) proposed that religions in the U.S. tend to promote positive health behaviors, social integration and support, and shared beliefs that often unite people of the same religion, especially (see also Schumaker 1992). Other scholars claim that certain dimensions of religion can buffer against and reduce stress, generating more positive mental well-being (see e.g., Bridges and Spilka 1992; Ellison 1994; Ellison et al. 2001; Schnittker 2001). Ritual behaviors may also allow individuals to release emotions in a "socially sanctioned milieu that provides secure boundaries" (Jacobs 1992:291; see also Spiro 1966). These religious experiences, beliefs, behaviors, and social networks provide outlets, worldviews, and support that may be beneficial for an active practitioner's mental health.

In the Japanese context, three theories seem to be most appropriate for the present study: religious coping, activity theory, and worldviews. Although I describe these theories in separate sections, it is important to note that they overlap significantly in their application and scope. The connection between psychological distress and one ritual or belief can be explained by more than one theory at a time. To clarify this

discussion, however, each theory and its accompanying hypotheses are addressed separately.

Religious Coping

One theoretical explanation is that individuals rely on religious practices and beliefs to provide coping mechanisms in times of distress. Psychologist Kenneth Pargament explains coping in the religious context as "the search for significance in the face of stressful life situations" (1996:217), and he argues that religion provides spiritual support and an important sense of meaning, purpose, and significance that help one deal with life's unfortunate and difficult situations (see also Ferraro and Kelley-Moore 2000; Loewenthal 2007; Krause et al. 2001; Musick 1996; Pearce 2005; Schaie, Krause, and Booth 2004:114-162). Particularly with situations seemingly beyond one's control, scholars have shown that coping mechanisms found in religious faith and through rites can have especially powerful effects. It is important to note that such coping devices can have positive or negative effects on well-being depending on the individual or social context and the type of coping used (Pargament 1997).

A common theme of Japanese religiousness is to 'turn to the gods in times of distress' (Nelson 1996:141; Reader 1991; Traphagan 2005:405). Many also seek aid from their ancestors (Klass 2005). Therefore, a theory of religious coping is an appropriate analytical tool in this context. In Japan, religious rituals, beliefs, and the purchase of certain sacred goods are common in times of misfortune (see Miller 1995). For some, ritual interactions with one's ancestors or with a host of abstract and somewhat disconnected *kami* and buddhas are common. For others, periodic shrine or temple visits or pilgrimages and the purchasing of amulets (*omamori* or *ema*) and talismans (*ofuda*) to protect one's family and friends or to show concern are valuable sources of comfort (Martinez 2004; Traphagan 2004). Additionally, most Japanese do not belong to a

religious organization, so they are free to visit any shrine or temple throughout the country to seek solace based on their needs at the time (Reader and Tanabe 1998).

Although religious coping can offer solace for individuals who are suffering, in a cross-sectional analysis such as this, it is likely to be connected with distress. This is primarily because individuals who rely heavily on these coping tactics are likely to be suffering from one or more life stressors. Thus, they may be distressed. One explanation for this is that for religious coping to be most effective, it must be part of the way one typically interprets and deals with life (Pargament 1997). In Japan, where faith the efficacy of mystical beings, for instance, is not very common, higher levels of beliefs may be a sign that one is afflicted and, under these circumstances, is turning to religion for comfort or meaning.

To test for this theoretical association, the multivariate analyses in the following sections include a *religious coping* index. This index includes six variables that assess beliefs that "religion" (*shûkyô*), *kami*, or *hotoke* (ancestors, Buddha, buddhas) provide comfort, peace, aid, or protection. It also includes a potentially negative coping measure: *kami* and *hotoke* curse people. The aforementioned arguments led me to my first hypothesis:

Hypothesis 1: *Religious coping will be positively and significantly connected with increased CES-D symptoms (distress).*

Activity Theory

According to activity theory, elderly in particular intentionally remain physically and mentally active to offset mental, physical, and social problems that often come with old age (Moberg 2001). Specifically, David Moberg suggests that older Americans who remain active and are intrinsically religious are more likely than those who are extrinsically motivated to have lower rates of depression and less anxiety, for instance (2001:63; see

also Plante and Sharma 2001). Unlike ritual practice theory, which helps explain connections between ritual enactment and *beliefs* (Collins 1975; Marshall 2002; Stark and Finke 2000), activity theory focuses on the relationship between *well-being* and certain activities—in this case religious. Though Moberg's research focuses on U.S. elderly, this rationalization is particularly appropriate in the Japanese context because scholars of aging in Japan have offered a very similar explanation to describe healthy elderly. In Japan, a healthy elderly—as defined by society—is someone who remains physically and mentally active and somehow engaged in the community (see e.g., Traphagan 2004).

For the most part, scholars agree that ritual actions are the most important and most frequent signs of regular religiousness (Davis 1992; Reader 1991; Traphagan 2005; Yanagawa 1991). In recent years, a few studies have linked these ritual behaviors to well-being. According to anthropologist John Traphagan, "Japanese religious practice is most directly associated with the wellness of being, both for the living and the dead" (2004:19). Here, he is stressing a reciprocal relationship that centers on well-being: the ancestors protect the living relatives and the living keep the memories of the dead alive by conducting certain rituals. It is active involvement in the rites that appears to affect their well-being.

Similarly, Kawano (2005) discusses how ritual acts in Japan embody certain morals that focus on individual and collective (i.e., family and community) wellness. Indeed, Traphagan (2005) suggests that any study of religion and health should include ritual practices, especially cross-cultural research. By making offerings at home ancestral altars (*butsudan*) or Shintô home altars (*kamidana*), visiting Shintô shrines or Buddhist temples in times of need, and participating in or attending festivals (see Roemer 2006, 2007), Japanese reinforce and develop relationships with each other and with their ancestors and various gods, spirits, deities, and buddhas to assure their overall well-being.

One can also argue that because Japan has a long tradition of Buddhist philosophical influence, certain aspects of Buddhism, such as self-realization, self-discipline, self-fulfillment, and self-mastery, may explain connections between religious practices and positive well-being in Japan (Groth-Marnat 1992). Although most Japanese may not be aware that these cultural traits stem from Buddhism, they are common aspects of society (see e.g., Kondo 1990). Additionally, there are "esoteric" Buddhist treatments such as *kaji* that have been linked to the healing of a variety of chronic illnesses (Winfield 2005:108). It is important to note that the focus of these traits is *active* ritual participation, such as meditation, sacred offerings, and self-purifications. Though there is a focus on internal cognitive self-examination (Kawahara 2005), in general Buddhism is more "experience-based" than belief-oriented (Choo Chang and Dong-Shick 2005:156), and this is especially the case with Japanese Buddhism. According to Buddhist traditions, both life and death require training (Groth-Marnat 1992), and Japanese who are influenced by such philosophies are likely to actively seek mental well-being via specific rituals.

Based on the activity theory as described by Moberg and the Japanese examples highlighted above, I proposed the following hypothesis for this study:

Hypothesis 2: Japanese who are religiously active (e.g., conduct household rituals) will report significantly fewer depressive symptoms than those who are less active.

Religious Worldviews

A final theoretical device employed in this chapter is worldviews. Religion can provide frameworks (Blasi 1999), a theodicy (Musick et al. 2000), or worldviews (Idler 1994; Luckmann 1967) that allow individuals to make sense of their worlds and life after death. Indeed, Clifford Geertz argued that providing meaning systems is a core function of religion (1966; see also Alcock 1992). Whether or not these worldviews are the most

important aspects of one's religiousness, they appear to be closely connected with psychological well-being.

In Gordon Matthews' (1996) ethnographic study *What Makes Life Worth Living* in Japan and the U.S., he provides examples of Japanese who find meaning in life from religious practices and beliefs (see also Lebra 1984:162-163). Similarly, Traphagan (2005) argues that ritual *enactment* in Japan helps provide meaning to ultimate questions, such as those regarding life and death (see also Kawano 2005). In life's most troubling times, especially, religion can become an essential source of comfort and provide meaning for Japanese.

More broadly, religious practices and beliefs in Japan provide order. In one sense, this is because Japanese religiousness often focuses on individual and community wellness for the living and the dead. This emphasis on well-being via rituals and sacred offerings is an expression of concern for others (Traphagan 2004), and this creates a worldview that encourages—though does not mandate—structure and positive relationships. The frequent performance of sacred acts, such as household rituals and shrine or temple visitations, also reinforces social structures in daily life and maintains certain norms, such as social hierarchies, respect, and purity (Kawano 2005). Compared to monotheistic or exclusive religions, such as Christianity, Judaism, and Islam, an important difference here is that in Japan it is a *physical embodiment* of ritual behaviors—rather than cognitive reasoning or morals that stem from doctrines or theologies—that reflects concern for well-being and moral order. Even when life is not plagued by losses or illness, Japanese sustain certain practices and beliefs because they help provide tangible structure in life (Kawano 2005) and because the rites act as continual expressions of concern for the wellness of both the living and the dead (Traphagan 2004). What we can determine is that, for many Japanese, religiousness is mainly about ritual behaviors that

are ultimately concerned with tangible goods or rewards on earth that are believed to help secure individual or collective well-being and order. Based on this interpretation, it is possible to see the strong overlap between activity theory, religious coping, and worldviews.

To assess the strength of the worldviews' explanation, this paper includes several measures of religious beliefs. The variables are intended to measure different dimensions of order or structure concerning life and the hereafter. The following hypotheses exemplify my expected findings:

Hypothesis 3: Belief in kami *(gods, deities, spirits, God) and* hotoke *(ancestors, Buddha, buddhas) will be negatively correlated with self-reported symptoms of distress.*

Hypothesis 4: Belief that faith and religion are important for mental and physical health will be negatively correlated with self-reported symptoms of distress.

METHODOLOGY

Data

Previously available individual-level datasets on Japanese populations did not include questions on psychological distress *and* religiosity. Therefore, in the summer of 2007 I fielded a new self-administered mail survey to 600 Japanese adults living in Kyôto Prefecture. Although Kyôto has a rich history and thousands of temples and shrines, there is little evidence to suggest that it is a particularly religious region. In terms of religious organizations, in 2005 Kyôto ranked ninth out of 47 prefectures in number and fifteenth in religious organizations per capita (Statistics Bureau 2008:747, 39). These figures do not tell us the extent to which Kyôto citizens visit these places of worship or maintain their beliefs, however. Also, there are no studies that indicate that Kyôto residents are more or less depressed than their peers in other prefectures.

Design of the survey began with a careful review of current surveys that include religion or mental health measures. Although there are a number of studies that examine psychometric properties of certain health measures, such as psychological distress, there are very few that discuss the reliability or validity of religion questions. For the most part, religion questions are limited to religious membership (e.g., affiliation with a religion or degree of devotion to a religion—see Chapters 1 and 3), and some include questions about beliefs (e.g., belief in the supernatural or an afterlife). Recently, religion scholars at Nanzan University in Japan conducted a survey on "Asian values", and this included a number of religion questions (see Kisala 2001). However, they did not include mental health measures. Furthermore, this survey lacked questions on common ritual practices. For these reasons, the survey I designed drew from major surveys when appropriate and included new questions to create a more comprehensive interpretation of common religious experiences in contemporary Japan.

The second step in the design process included soliciting advice from experts in the field. I worked with Japanese and American survey design experts as well as scholars who specialize in Japanese religion and well-being.

The third step was qualitative pre-testing of the survey. I conducted focus groups and semi-structured interviews with native Japanese adults in the U.S. and in Japan. The focus groups centered on the topics of health and religiousness, and the primary objectives were to test the wording of the survey questions and to make sure the survey captured the core dimensions of these topics. Meetings began with general questions about the two main concepts, and I asked more specific questions further into the discussions to generate more detailed explanations, also known as the "funnel" technique (see Morgan 1988). One specific addition that came from the focus groups and interviews was the need to add a control for "balance" in everyday life when addressing health in

Japan. Specific wording of this particular question was a result of the focus groups, interviews, and formal pretests of the survey that were conducted in Japan. Additionally, I chose to follow the example of several other Japanese community and national surveys and include *kami* and *hotoke* together in the same questions—as opposed to asking about beliefs in each separately. This allowed me to compare my results directly with previous research and follows the suggestions of my informants. These qualitative methods resulted in the preparation and pre-testing of a this new survey instrument.

Survey Sampling and Administration

The respondents in this study came from a systematic random sample of 600 households in Kyôto Prefecture. The study population was generated from family names that were randomly selected from the most recently published telephone books (May 2007) for each city, town, and village in the prefecture (see Appendix D for details). In the past, it was possible to acquire contact information from city hall (see e.g., Brinton 2003); however, recently enacted privacy laws and a growing culture of survey skepticism now prevent such methods of research (see Inaba 2006, 2007).

Surveys were mailed August 1, 2007, and respondents were requested to return the completed 31-question survey in the postage paid envelopes by August 20, 2007. Of the 600, we received 285 by the first deadline. Reminder cards were mailed to the same 600 households on August 20. From those requests, another 48 were received, for a response rate of 55.50 percent, or 333 out of 600 surveys. Average response rates for surveys in Japan has declined dramatically in the new century, with major national surveys such as the Japanese General Social Surveys averaging between 50.5 to 64.9 percent for face-to-face interviews between 2000 and 2005, and 48 to 55 percent for mailed questionnaires in 2003 (*Nihonban General Social Surveys* 2006:31, 2007:17). Although this sample is relatively small, this is the first study of its kind, and the findings

warrant our attention and encourage future scrutiny of the results with larger, national datasets that add these important questions.

Measures

Table 4.1 illustrates the weighted mean scores, standard deviations, ranges, and number of valid responses for the study variables (see Appendix C for further details and for Japanese versions of the questions). The percentage of male and older respondents was comparably higher in this sample. This is likely a result of the fact that older men tend to be the heads of household who are listed in telephone books. In an attempt to counter this, the letter describing the survey requested that recipients with more than one person living in the home choose the family member to complete the survey who was at least 20 years of age and whose birthday was closest to August 1. Despite these instructions, many of the recipients may have disregarded this request. To account for these discrepancies, all reported statistics are weighted based on the actual sex ratio and age ranges (increments of five years from 20 to 80 and older) for Kyôto Prefecture in 2005 (Statistics Bureau 2007:37, 50-51). The weighted variables more accurately reflect the true population and improve our ability to generalize the results.

Table 4.1: Weighted Descriptive Statistics of Study Variables.

	Mean	S.D.	Range	N
Dependent Variable				
Psychological distress	.315	.318	.00-1.386	321
Socio-demographics				
Gender (male = 1)	.431	.504	0-1	312
Age (in years)	50.520	18.522	23-94	312
Education (by levels)	2.924	1.074	1-5	306
Household income	5.264	1.913	1-9	304
Urban (urban = 1)	.416	.503	0-1	309
Marital status (married = 1)	.689	.472	0-1	310
Parental status (1 or more children = 1)	.743	.446	0-1	306
Health Controls				
Self-rated physical health (Poor = 1, Good = 5)	3.457	1.104	1-5	302
Balance (Lack = 1, Have = 5)	3.341	1.320	1-5	301
Traumas (1 or more traumas = 1)	.697	.472	0-1	302
Religious Measures				
Religious Coping Index (Disagree = 1, Agree = 5)	17.270	6.379	6-30	299
Religion provides comfort	2.562	1.323	1-5	307
Praying purifies me	3.372	1.327	1-5	306
Kami-Hotoke help & support me	2.916	1.210	1-5	310
Kami-Hotoke give aid	2.792	1.253	1-5	308
Kami-Hotoke protect me	3.204	1.250	1-5	309
Kami-Hotoke curse people	2.495	1.286	1-5	309
Butsudan (own one = 1)	.537	.511	0-1	304
Frequency of butsudan rituals	2.215	1.727	1-7	195
Kamidana (own one = 1)	.397	.498	0-1	310
Frequency of kamidana rituals	4.382	1.922	1-7	145
Kami-Hotoke exist (Disagree = 1, Agree = 5)	3.391	1.359	1-5	307
People become kami-hotoke after death (Agree = 1, Disagree = 5)	2.303	1.307	1-5	293
Ancestors (Disagree = 1, Agree = 5)	4.431	1.001	1-5	311
Faith & health (Disagree = 1, Agree = 5)	3.058	1.255	1-5	309
Religious identity				
Very religious	.059	.239	0-1	312
Somewhat religious	.155	.368	0-1	312
Do rituals but not religious	.472	.508	0-1	312
Not religious	.163	.376	0-1	312
Atheist	.123	.334	0-1	312

Psychological Distress

The first variable listed in Table 4.1 is the dependent variable, psychological distress. The questionnaire for this study states, "We would like to ask you about your physical and mental state during the past week. How often did you experience each of the following feelings or matters?" Twelve of the 20 Japanese CES-D questions were included. Two questions were positively worded to prevent respondents from simply marking all items similarly without reading the questions carefully. For statistical analyses, however, these two questions were dropped because they lowered reliability and validity scores for the index (see also Kikuzawa 2001). The ten CES-D measures included were: "I was bothered by things which usually don't bother me; I felt I could not shake off the blues, even if my family or friends cheered my up; I felt that everything I did was an effort; I felt fearful; My appetite decreased; I talked less than usual; I felt lonely without company; I felt sad; I felt depressed; I had trouble keeping my mind on what I was doing." Responses were 1 = not at all, 2 = one or two days a week, 3 = three or four days a week, and 4 = almost everyday.

The distress variable was created by first summating the responses for the 10 items then taking the mean. I used list-wise deletion to address missing data, and employing the arithmetic mean provided a slightly larger sample size than the summated index without changing results. Because the distribution for this CES-D measure is highly skewed (most reported none or a few symptoms), I used the log of its mean in the analysis. Taking the log reduces the skewness and the standard errors and it improves the efficiency of the model (see Mirowsky 1999). In comparison with non-logged and squared measures, the logged variable had the lowest degree of skewness and the lowest standard errors. [1]

The internal consistency of the weighted, 10-item index was .902 (Crombach's alpha). This is slightly higher than that of previous studies (cf. Inaba 2002; Inaba et al., 2005; Iwata and Roberts 1996; Kikuzawa 2006; Okabayashi et al. 2004). Additionally, all 10 variables were positively correlated at the $p < .01$ level or lower, and a principal component analysis confirmed that the items load heavily on one Factor. Taken together, these findings support the use of this single index to appraise psychological distress on this Japanese sample.

Socio-demographic Controls

The next group of variables in Table 4.1 is the socio-demographic controls. After adding the standardized weights, 43 percent of the sample was male and the mean age was 50.52 (range = 23-94). Similar to previous research on Japan, most of the sample had at least a high school diploma or the equivalent, the mean annual household income was approximately US$36,000-54,000 (US$1 = ¥110), about 42 percent lived in major cities, 68.9 percent were married, and 74.3 percent had at least one child.

Health Controls

Because distress is highly connected with other measures of health, the models presented below include controls for self-rated physical health, a sense of balance in life, and the presence of one or more traumas. The first two variables are coded so that a higher score indicates better health and balance, and the scores displayed in Table 4.1 reveal that most respondents reported their health to be slightly above the middle level (on a scale of 1-5). The latter health control, presence of traumas, is dichotomous, and about 70 percent of the respondents reported having experienced at least one trauma in the past five years. Original analysis (not shown here) also included a measure of sense of control. Sense of control is highly predictive of positive well-being in the U.S. (see e.g.,

Mirowsky and Ross 2003); however, this measure is not significant in any model with this sample (see also Sastry and Ross 1998) so it was omitted from the models shown here.

Religious Measures

Unlike the dependent variable and the socio-demographic and health controls, many of these religion measures have not been used extensively in previous survey research in Japan and require greater explanation. Because religion is multidimensional, the survey included a number of religion measures, including beliefs, ritual behaviors, and religious identity. The first religiousness measure in Table 4.1 is the Religious Coping Index. Table 4.2 contains the correlation coefficients and standardized factor loadings of this index. Results of these tests indicate strongly that these six measures are highly and positively correlated (all at $p < .0001$), and the factor loadings indicate good reliability and validity and suggest a single factor (Eigenvalue = 4.052). Klein (2005) recommends standardized factor loadings above .600 to indicate good reliability. As the data in Table 4.2 reveal, the loadings for this index range from .730 to .881. Furthermore, the Crombach's alpha is .903, indicating that the study measures have good psychometric properties (see also Carmines and Zeller 1979).

Table 4.2: Correlation Coefficients and Standardized Factor Loadings of Religious Coping Items.

Item	1	2	3	4	5	Factor Loadings
1. Religion provides comfort & peace	1.000	--	--	--	--	.759
2. Praying purifies me	.665	1.000	--	--	--	.854
3. Kami-hotoke help & support me	.634	.694	1.000	--	--	.881
4. Kami-hotoke give aid	.485	.670	.723	1.000	--	.850
5. Kami-hotoke protect me	.559	.635	.703	.694	1.000	.846
6. Kami-hotoke curse people	.422	.516	.551	.585	.572	.730

All correlations significant at $p < .0001$ (two-tailed test)

The remaining religious measures include household rituals, beliefs or worldviews, and religious identity. Following the Religious Coping Index in Table 4.1 are four measures regarding rituals most commonly performed in one's home. I chose to focus on household rituals instead of shrine or temple visits or pilgrimages, for instance, because they are conducted more frequently and are, therefore, more likely to be connected with well-being. The first measure, Butsudan, refers to whether or not the respondent has a *butsudan* in his or her home. *Butsudan* are ancestor or Buddhist altars where family members make offerings to, maintain contact with, and pay respects to their ancestors (see Chapter 2 for details). In these data, 53.74 percent claimed to have a *butsudan* in their home, and these results are similar to previous studies (see e.g., Kawano 2005; Okada 1994). For those who have a *butsudan*, the survey included a follow-up question about the frequency of prayers or offerings the survey respondent makes at the *butsudan*. Response categories ranged from more than once daily to never (1-7), and the average was 2.215, or at least four to six times per week.

The survey included a similar question about *kamidana*, or household Shintô shrines. These are small shrines where Japanese pray to or make offerings of water, uncooked rice, or salt, for example, to Shintô *kami*. Of this sample, approximately 40 percent claimed to have a *kamidana* in their homes. On average, respondents who own *kamidana* make offerings or pray there several times a month (see Ishii 2004 for similar frequencies of ownership of and rites performed at *kamidana*).

The belief variables measure different ways of thinking about this world and the afterlife, and all evaluate levels of agreement or disagreement (1 is coded disagree, 5 is coded agree). The first, *Kami-Hotoke exist*, measures belief in the existence of *kami* and *hotoke*. Forty-seven percent either agreed or agreed somewhat with this statement. On the other hand, 56 percent disagreed or disagreed somewhat that "people become *kami* or *hotoke* after death". Most respondents (87.86 percent) agreed or agreed somewhat that it is important to respect one's ancestors, and about 32 percent agreed or agreed somewhat that "faith (*shinkô*) and religiousness (*shûkyôteki na koto*) are important for mental and physical health".

Finally, the survey included a religious identity question. One unique addition in this survey was a new category that derived from the survey pretests and from previous qualitative research. In addition to selecting from 'very religious', 'somewhat religious', 'not religious', and 'atheist', respondents were also able to choose a middle category: 'I am not religious, but I do rituals such as make offerings and pray.' As expected, more respondents selected this category than any other single option (47.2 percent—see Table 4.1). The second most frequently chosen category was 'not religious' (16.3 percent), followed by 'somewhat religious' (15.5 percent), 'atheist' (12.3 percent), and 'very religious' (5.9 percent).[2]

Table 4.3 illustrates the zero-order correlations for the dependent variable and the 15 religious measures. Two important results deserve mentioning here. First, there are a number of significant bivariate associations between these religion measures and psychological distress. The religious coping index has a moderate positive connection for this sample, and owning a *kamidana*, frequency of *kamidana* rituals, beliefs that *kami* and *hotoke* exist and ancestors should be respected, and atheists are also positively linked to distress. On the other hand, owning a *butsudan* is negatively correlated, indicating that those who own one are less likely than those who do not to report many CES-D symptoms. The belief that faith and health are related is also negatively associated here. The second noteworthy point here is more general: many of these religious measures are highly correlated with each other. For this reason, in the multivariate analyses I generally include each religious measure in separate models to avoid misleading interpretations that may result from multicollinearity, or a high degree of correlation among the religion variables.

Table 4.3: Zero-order Correlations for Psychological Distress and Religion Variables.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Distress Index	1.00													
2. Religious Coping Index	.10+	1.00												
3. Butsudan	-.12*	-.07	1.00											
4. Frequency of butsudan	.04	-.46***	--	1.00										
5. Kamidana	.15*	-.12*	.37***	-.05	1.00									
6. Frequency of kamidana	.40***	-.38*	.13	.76***	--	1.00								
7. Kami-Hotoke exist	.14*	.59***	-.02	-.37**	-.15**	-.14	1.00							
8. Dead become kami-hotoke	-.04	.45***	-.21***	-.32***	-.30***	-.30***	.47***	1.00						
9. Ancestors should be respected	.15**	.45***	.12*	-.46**	-.11*	-.12	.43***	.33***	1.00					
10. Faith & health	-.12*	.61***	.04	-.41***	.01	-.47***	.42***	.30***	.34***	1.00				
11. Very religious	-.07	.21***	-.04	-.11	.00	-.16*	.24***	.11+	.14**	-.21***	1.00			
12. Somewhat religious	-.02	.25***	-.08	-.23***	-.01	-.24**	.16**	.21***	.18***	-.31***	-.11+	1.00		
13. Do rituals, not religious	-.04	.17**	.01	-.25***	-.01	-.20*	.06	.00	.11*	-.04	-.24***	-.40***	1.00	
14. Not religious	-.01	-.29***	.09	.29***	.06	.30***	-.05	-.08	-.03	.15**	-.11*	-.19***	-.42***	1.00
15. Atheist	.13*	-.43***	.01	.51***	-.05	.35***	-.42***	-.26***	-.46***	.43***	-.09+	-.16**	-.35***	-.16**

+ p <.10, * p < .05, ** p < .01, *** p <.001 (two-tailed test)

Statistical Model

The statistical models in this study were conducted in stages to determine the relative significance of the different main variables tested. The baseline model explored correlations between the socio-demographic controls and psychological distress. This model provided a comparison with previous research using the Japanese CES-D Scale as an outcome variable. I then added the religion measures to address the primary research question for this chapter: is religiousness in Japan connected with psychological distress? Finally, I examined whether the three health controls were connected with distress and assessed how the addition of these variables might alter the effects of the other measures.

All models include an age-squared variable because age has been shown to have a non-linear association with depression in Japan (Inaba 2002). Additionally, these models include a standardized weight, and list-wise deletion is used to address missing values resulting in a sample size of 269 respondents in all models. For comparative purposes, the tables display the unstandardized (*b*) and standardized coefficients (Beta), and standard errors are in parentheses.

Analytic Techniques

Because the outcome variable for this chapter is an index that approximates a continuous linear scale between 10 and 40 (logged scale is .00 - 1.386), ordinary least squares regression was used. The general equation for each full model was

$$\ln Y = a + B^{1X1} + B^{2X2} + B^{3X3} + u,$$

where $\ln Y$ is the logged distress outcome, a is a constant term, X^1 represents a vector of socio-demographic controls, X^2 represents a vector of religious controls, X^3 represents a vector of health controls, and u is the error term.

RESULTS

Religious Coping and Psychological Distress

Model 1 of Table 4.4 on the following page reveals associations between psychological distress and the socio-demographic controls. Similar to previous research that uses the Japanese CES-D Scale as a dependent variable, Age has a robust, negative correlation with distress, indicating that those who are older are less likely to report CES-D symptoms than those who are younger,[3] all else being equal (see e.g., Inaba et al. 2005). The inverse relationship for income here has also been found in other studies with the same outcome (Inaba 2002; Inaba et al. 2005). Another consistent finding is that, unlike in the U.S., education does not seem to impact CES-D symptoms in Japan (cf. Inaba et al. 2005; for exception see Kikuzawa 2006). There are only two models (shown below) in which education has a weak ($p < .10$) negative tie with distress.

In contrast to most studies on depression (see e.g., Hopcroft and Bradley 2007), this sample does not indicate a gender difference concerning the outcome. A few studies that have evaluated social correlations with distress using the Japanese CES-D Scale have found that women are more likely than men to report symptoms of depression (Inaba et al. 2002; Inaba et al. 2005; Okabayashi 2004); however, other studies have found no statistical distinction (see e.g., Kikuzawa 2006).

Finally, the results here indicate that Japanese with one or more child are much more likely to report CES-D symptoms than those without. To my knowledge, no other study on Japanese psychological distress has included this control, and as the results in all models indicate, it maintains a consistent positive correlation with the outcome variable. Parents report significantly higher levels of distress than those without children.

Table 4.4: OLS Coefficients and Standardized Estimates for Regression of Religious Coping on Psychological Distress.

	Model 1		Model 2		Model 3	
	b	Beta	*b*	Beta	*b*	Beta
Intercept	2.54***	--	2.37***	--	3.03***	--
	(.40)		(.40)		(.32)	
Sex	.02	.03	.05	.07	.03	.04
	(.04)		(.04)		(.03)	
Age	-.04***	-1.88	-.04***	-1.96	-.04***	-1.97
	(.01)		(.01)		(.01)	
Age-squared	.00***	1.55	.00***	1.56	.00***	1.52
	(.00)		(.00)		(.00)	
Education	-.04	-.11	-.03	-.09	-.03	-.08
	(.02)		(.02)		(.02)	
Income	-.03*	-.15	-.03*	-.14	-.02*	-.10
	(.01)		(.01)		(.01)	
Urban	.05	.08	.07+	.10	.05+	.08
	(.04)		(.04)		(.03)	
Married	-.01	-.02	-.04	-.05	-.03	-.05
	(.06)		(.06)		(.04)	
Parental status	.17**	.22	.19**	.25	.19***	.24
	(.06)		(.06)		(.05)	
Religious Coping	--	--	.01***	.21	.01**	.12
			(.00)		(.00)	
Physical health	--	--	--	--	-.13***	-.40
					(.02)	
Balance	--	--	--	--	-.07***	-.26
					(.01)	
Traumas	--	--	--	--	.09**	.12
					(.04)	
Adj. R^2	.143		.179		.499	

Notes: N = 269
+p < .10, *p < .05, ** p < .01, *** p <.001 (two-tailed test)
b Unstandardized coefficient
Beta Standardized coefficient
Standard error in parenthesis

The second model in Table 4.4 displays the effect of the Religious Coping Index on psychological distress. As I predicted in my first hypothesis, the relationship is significant and positive (Beta = .21, $p < .001$). Because these data are cross-sectional, however, we cannot say with certainty whether religious coping causes mental distress or if people who are distressed are more likely to seek these coping devices because of their health.

It is highly plausible that the latter is true and that Japanese who are struggling psychologically are more likely than those who are not to use these coping beliefs as consolation or for comfort (see Pargament 1997). Many individuals use religion as a coping device in times of trouble, and even with the addition of potentially confounding variables, such as the health controls in Model 3, the Religious Coping Index remains correlated with distress (Beta = .12, $p = .011$), though its effect size is attenuated.

This study is the first of its kind to control for the effects of several health measures on CES-D symptoms in Japan. As anticipated, the relationship between self-reported physical health and distress is negative and remains very strong in every model. Those who consider themselves to be in good health are significantly less likely to report CES-D symptoms than those who claim poor health. In all models, the standardized coefficients (Betas) for Physical health range from -.37 to -.41 and are second only to Age. Similarly, Balance is negatively and significantly correlated across all models, and having experienced one or more traumas has consistent, positive associations. Overall, the statistical significance and Beta scores imply that these three health controls are important indicators of psychological distress in Japan. Furthermore, the change in Adjusted R^2 values also suggests the need to include these measures when examining psychological distress in Japan. In Table 4.4, for instance, the Adjusted R^2 increases by over 349 percent from .143 in Model 1 to .499 in the full model (3).

Household Rituals and Psychological Distress

The models in Table 4.5 tested whether household rituals are associated with distress. To conserve space, only statistically significant relationships are shown, though the models include the same controls as in Table 4.4. In Model 1, ownership of a *butsudan* is negatively correlated (Beta = -.20, p = .002) yet ownership of a *kamidana* is positively associated (Beta = .21, p < .001), net of the socio-demographic controls. These effects decline somewhat yet remain strong in the full model with the health variables (Butsudan—Beta = -.21, p < .001; Kamidana—Beta = .16, p = .001). Of the two, it is not surprising that ownership of a *butsudan* is negatively correlated with distress. In Chapter 2, I discussed theoretical reasons for this association—namely, that ritual behaviors at the *butsudan* can offer solace, structure in life, and peace of mind. Such acts also allow individuals to maintain contact with the recently (and not so recently) departed. Rituals at the *kamidana*, however, are much less personal and most commonly involve simple offerings and bows of respect for the *kami*. Additionally, *kami* are more commonly feared than one's ancestors. Perhaps it is the ways the object(s) of attention (e.g., ancestors versus *kami*) are interpreted or the types of connections made that explain the reverse effects.[4]

Table 4.5: OLS Coefficients and Standardized Estimates for Regression of Household Rituals on Psychological Distress.

	Model 1		Model 2	
	b	Beta	*b*	Beta
Intercept	2.26***	--	2.86***	--
	(.40)		(.32)	
Age	-.03***	-1.58	-.03***	-1.61
	(.01)		(.01)	
Age-squared	.00***	1.29	.00***	1.26
	(.00)		(.00)	
Income	-.03**	-.16	-.02*	-.12
	(.01)		(.01)	
Parental status	.15**	.20	.16***	.21
	(.06)		(.05)	
Butsudan	-.14**	-.20	-.14***	-.21
	(.05)		(.04)	
Kamidana	.15***	.21	.11***	.16
	(.04)		(.03)	
Physical health	--	--	-.12***	-.39
			(.02)	
Balance	--		-.07***	-.27
			(.01)	
Traumas	--		.11***	.16
			(.03)	
Adj. R^2	.187			.524

Notes: N = 269
Models include controls for sex, education, urban residency, and marital status.
*p <.05, ** p < .01, *** p <.001 (two-tailed test)
b Unstandardized coefficient
Beta Standardized coefficient
Standard error in parenthesis

The other noteworthy finding is that the frequencies of ritual acts at both *butsudan* and *kamidana* are not significantly related (results not shown).[5] In other words, it is the ownership of these objects that has a stronger tie to psychological well-being than the number of times one conducts rites that are associated with them. Consequently, these results do not offer support for activity theory. Owning a *butsudan* or *kamidana* has important effects, though that does not mean the respondent is actively involved with either—indeed, a number of respondents who reported that they have *butsudan* or *kamidana* in their homes indicated that they never pray or make offerings there.

Religious Worldviews and Psychological Distress

Table 4.6 includes models that assess the strength of the religious worldviews' explanation. Again, only statistically significant associations are shown. Of the four worldviews tested, belief that people become *kami* and *hotoke* after they die was not correlated so the results are not included here. Unexpectedly, the belief that ancestors should be respected (Model 1) is positively related with psychological distress (Beta = .16, $p < .001$). Also, contrary to Hypothesis 3, Model 2 reveals that belief in the existence of *kami* and *hotoke* is positively correlated with CES-D symptoms (Beta = .13, $p = .005$), and the findings in Model 3 contradict Hypothesis 4 and show that the belief that faith or religiousness are important for health (Faith&health) has a weak positive association (Beta = .09, $p = .061$). Interestingly, in the bivariate association in Table 4.3 above, Faith&health is *negatively* correlated. Adding adjustments for health changes the connection between the Faith&health variable and CES-D symptoms by 411.11 percent[6] and the link becomes positive. In other words, this belief serves as a proxy for other health measures, and when we control for these in the model, the effect of Faith&health on well-being becomes positive and remains significant.

Table 4.6: OLS Coefficients and Standardized Estimates for Regression of Religious Worldviews on Psychological Distress.

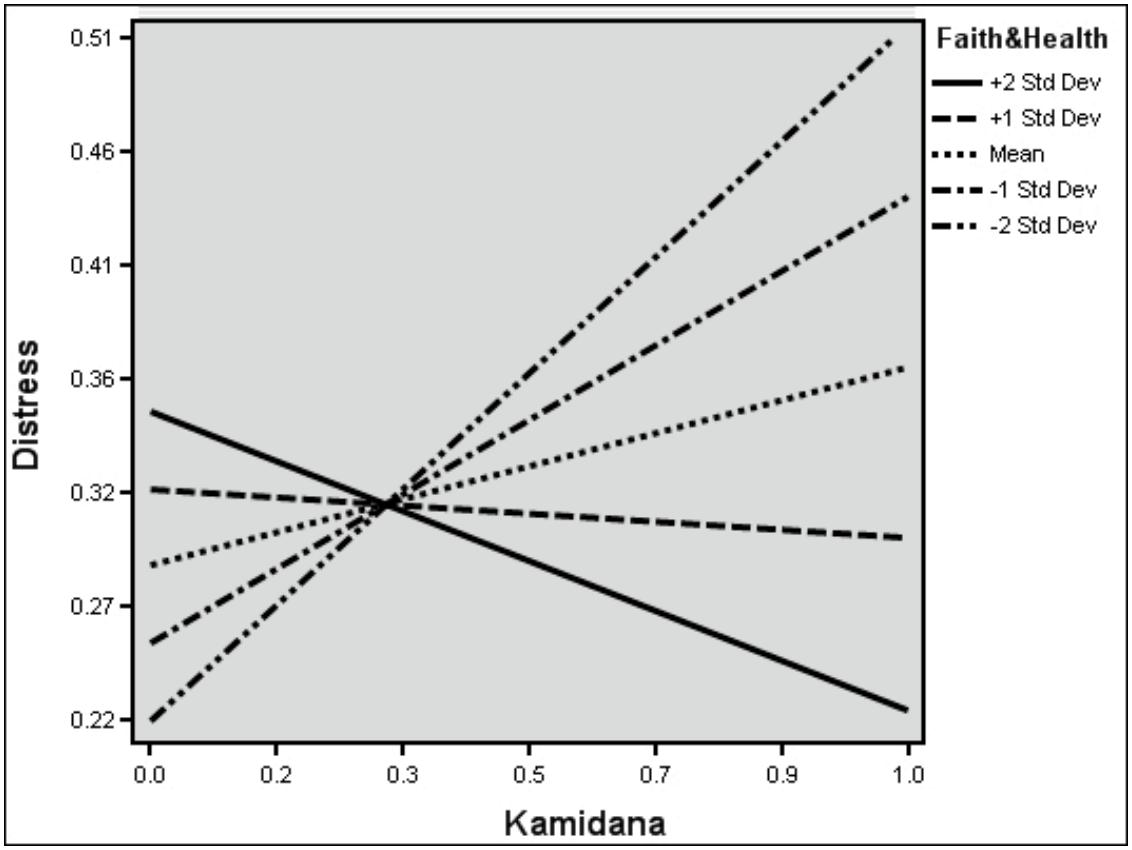
	Model 1		Model 2		Model 3		Model 4		Model 5	
	b	Beta	*b*	Beta	*b*	Beta	*b*	Beta	*b*	Beta
Intercept	2.96***	--	3.07***	--	3.11***	--	3.02***	--	2.99***	--
	(.32)		(.32)		(.32)		(.32)		(.32)	
Age	-.04***	-2.01	-.04***	-2.02	-.04***	-1.97	-.04***	-1.88	-.04***	-1.83
	(.01)		(.01)		(.01)		(.01)		(.01)	
Age-squared	.00***	1.59	.00***	1.57	.00***	1.53	.00***	1.46	.00***	1.43
	(.00)		(.00)		(.00)		(.00)		(.00)	
Education	-.02	-.07	-.03	-.08	-.03+	-.09	-.03	-.08	-.03	-.08
	(.02)		(.02)		(.02)		(.02)		(.02)	
Income	-.02+	-.09	-.02*	-.11	-.02*	-.11	-.02*	-.11	-.02*	-.11
	(.01)		(.01)		(.01)		(.01)		(.01)	
Urban	.04	.06	.05	.07	.06+	.08	.05	.07	.05	.08
	(.03)		(.03)		(.03)		(.03)		(.03)	
Parental status	.18***	.23	.20***	.26	.18***	.24	.16***	.21	.19***	.24
	(.05)		(.05)		(.05)		(.05)		(.05)	
Physical health	-.13***	-.40	-.13***	-.40	-.13***	-.41	-.12***	-.39	-.12***	-.37
	(.02)		(.02)		(.02)		(.02)		(.02)	
Balance	-.07***	-.25	-.06***	-.24	-.07***	-.27	-.07***	-.27	-.08***	-.30
	(.01)		(.01)		(.01)		(.01)		(.01)	
Traumas	.11**	.14	.11**	.15	.11**	.15	.11**	.14	.11**	.15
	(.03)		(.03)		(.04)		(.03)		(.03)	
Ancestors	.05***	.15	--	--	--	--	--	--	--	--
	(.02)									
Kami-Hotoke	--	--	.03**	.13	--	--	--	--	--	--
			(.01)							
Faith&health	--	--	--	--	.03+	.09	--	--	.02+	.08
					(.01)				(.01)	
Kamidana	--	--	--	--	--	--	.07*	.10	.09**	.12
							(.03)		(.03)	
Kamidana x Faith&health	--	--	--	--	--	--	--	--	-.07*	-.12
									(.03)	
Adj. R^2	.507		.501		.493		.495		.510	

Notes: N = 269; Models include controls for sex and marital status.
+ p <.10, * p < .05, ** p < .01, *** p <.001 (two-tailed test)
b Unstandardized coefficient
Beta Standardized coefficient
Standard error in parenthesis

To explore these associations further, I also examined interaction effects between owning *kamidana* and *butsudan* and these worldviews. Model 5 in Table 4.6 reveals the only statistically significant finding from combinations of ownership of both types of altars and the four belief variables. With each unit increase in the belief that faith and religiousness are important for health, the effect size of owning a *kamidana* declines in relation to distress, controlling for all other measures (Beta = -.12, p = .015).

Figure 4.1 (below) demonstrates this association in greater detail. As the key indicates, the lines represent degrees of belief that faith and health are connected based on standard deviations from the mean (e.g., '+2 Std Dev' represents those who reported levels of agreement with this statement 2 standard deviations higher than the mean). This figure includes the same controls as in the above models and it shows several important results of this interaction. First, those who do not own a *kamidana* and believe that faith and health are connected are more likely than those who agree less with this statement to report more CES-D symptoms (denoted by the solid line). On the other hand, the relationship reverses itself for those who do own *kamidana*—they report fewer symptoms of distress than the others. For those who own *kamidana*, each unit decrease in agreement that faith and health are related is correlated with higher levels of distress. In other words, there is a critical linear link between ownership of this household altar and this worldview concerning psychological distress.

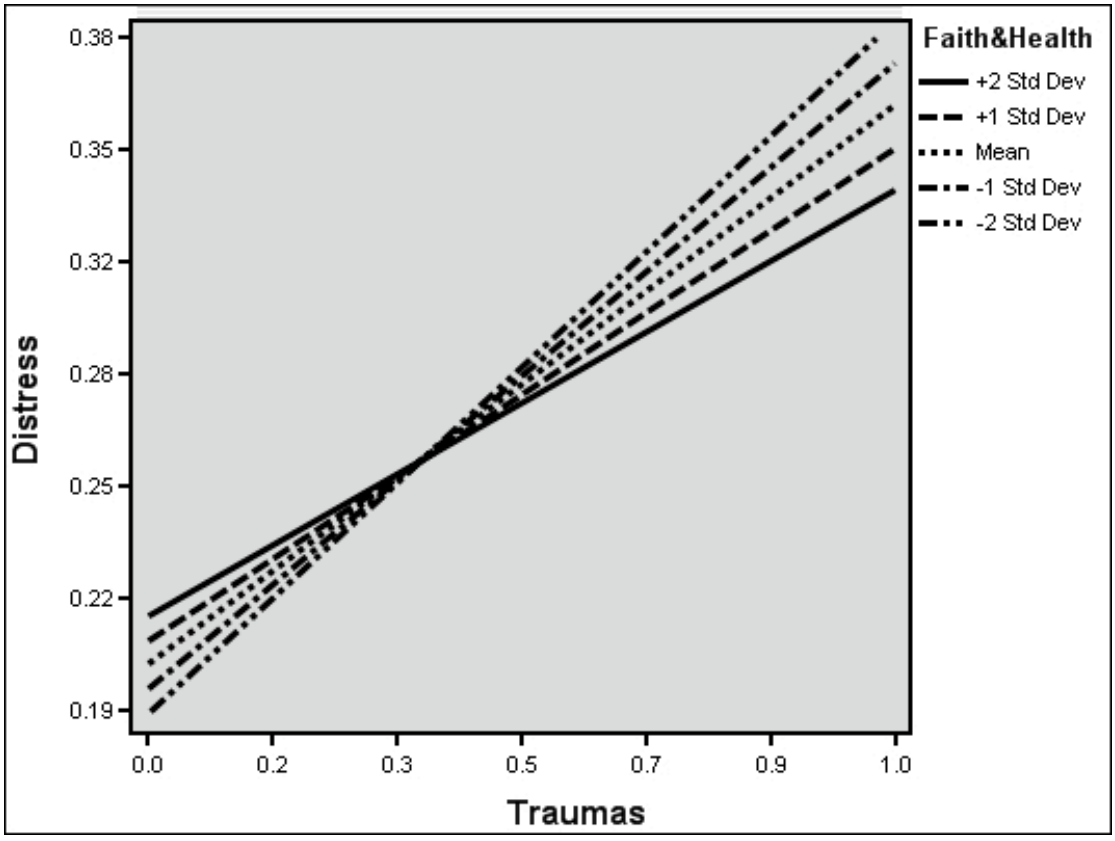
Figure 4.1: Interaction Effects of Kamidana and Faith&Health on Psychological Distress.



My analysis also included tests of the stress buffering hypothesis. There was only one cross-product that supported this theory with these data. First, there were no significant interactions between religious coping and life stressors, such as the experience of traumatic events, poor self-reported health, and low levels of balance in one's life. Among the beliefs in Table 4.6 above, the interaction between Faith&health and Traumas was the only statistically significant association concerning distress. Using the same controls as in Table 4.6 Model 3, this cross-product is negatively correlated with distress (Beta = -.11, p = .016). Figure 4.2 (below) illustrates how this relationship works. For

instance, we see that those who have experienced a traumatic event recently report more CES-D symptoms than those who have not regardless of their belief that faith and health are related. The other important finding is that those who have had a traumatic experience and who maintain this worldview (above the mean) report fewer distress symptoms than those who do not believe that faith and health are connected. Belief in this worldview seems to act as a buffer for those who have suffered from a recent tragedy.

Figure 4.2: Stress Buffering Effects of Traumas and Faith&Health on Psychological Distress.



Religious Identity and Psychological Distress

As a final example, Table 4.7 displays the effects of religious identity on distress in Japan. Of the five answer categories, 'atheist' is the only option that is associated in a bivariate model (see Table 4.3 above). Table 4.7 allows us to compare the effects of all five religious identities, and Model 1 shows that compared to those who do rituals but do not consider themselves religious (the category with the highest frequency), atheists are more likely to report psychological distress symptoms (Beta = .15, p = .020). In the full model (2), there are no statistically significant differences among these religious identities concerning this outcome. In this case, the small sample sizes per category may explain the lack of statistical differences.[7]

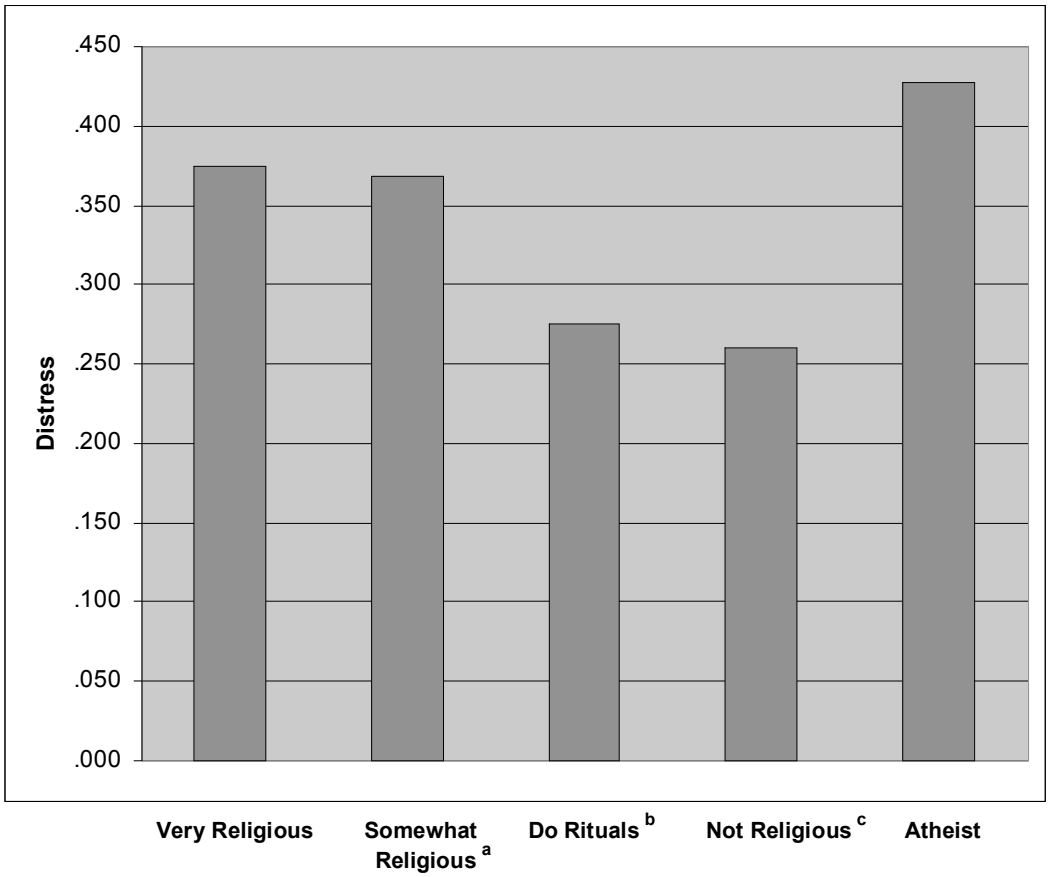
Table 4.7: OLS Coefficients and Standardized Estimates for Regression of Religious Identity on Psychological Distress.

	Model 1		Model 2	
	b	Beta	*b*	Beta
Intercept	.36***	--	3.18***	--
	(.03)		(.36)	
Very religious[a]	-.09	-.06	.02	.01
	(.09)		(.07)	
Somewhat religious	-.03	-.03	.05	.05
	(.06)		(.05)	
Not religious	-.02	-.02	-.07	-.08
	(.06)		(.05)	
Atheist	.15*	.15	.02	.02
	(.06)		(.06)	
Age	--	--	-.04***	-1.98
			(.01)	
Age-squared	--	--	.00***	1.54
			(.00)	
Education	--	--	-.04+	-.10
			(.02)	
Parental status	--	--	.18***	.24
			(.05)	
Physical health	--	--	-.13***	-.41
			(.02)	
Balance	--	--	-.07***	-.27
			(.01)	
Traumas	--	--	.10**	.13
			(.04)	
Adj. R^2	.016		.490	

Notes: N = 269
Model 2 includes controls for sex, income, urban, and marital status.
[a] Rituals is the religious reference category
+ p <.10, * p < .05, ** p < .01, *** p <.001 (two-tailed test)
b Unstandardized coefficient
Beta Standardized coefficient
Standard error in parenthesis

Another way to examine this association is to compare mean levels of each religious identity on distress. This is an efficient way of discovering statistical differences amongst these groupings without changing the reference category repeatedly in a regression model. As Figure 4.3 (below) illustrates, the mean scores of distress for the Somewhat religious are significantly different only from those who Do rituals but do not consider themselves religious ($p = .038$) and the Not religious ($p = .094$), net of the controls in the full model. Those in the Do rituals group are also different from the Atheists ($p = .029$). Also, the Not religious are significantly distinct from Atheists ($p = .036$). The Very religious do not differ statistically from any of the other categories. The findings in Table 4.7 and Figure 4.3 reveal only a few statistical differences concerning religious identity and distress, and the association between religious identity type and distress is non-linear.

Figure 4.3: Mean Scores for Religious Identity on Psychological Distress.



Notes:
[a] Somewhat Religious significantly different from Do Rituals ($p < .05$) and Not Religious ($p < .10$)
[b] Do Rituals significantly different from Atheists ($p < .05$)
[c] Not Religious significantly different from Atheists ($p < .05$)

DISCUSSION

The objective of this chapter was to assess whether several dimensions of religiousness are associated with psychological distress among Japanese adults. A number of U.S.-based studies have shown consistent, positive effects of religious participation and intrinsic religiousness on this outcome, and other studies have addressed negative effects. Given the multidimensional nature of religiousness, it is not surprising that

different dimensions have distinct effects—or none at all. Nonetheless, because these studies tend to focus on predominantly Christian samples in the U.S., it is unclear how these relationships may differ in cultures that do not have a strong Christian influence.

Japan presents a strikingly different religious (and otherwise) social context within which to examine these relationships. However, there is only one study that explores ties between religion and distress in Japan, and it focuses on junior and high school and college students and does not control for potentially confounding effects such as health and basic socio-demographics (Nishiwaki 2004). Therefore, we cannot tell from these results how robust the findings are among the general population.

Moreover, there are no surveys in Japan that include a sufficient number of culturally specific religion questions and mental health measures. The World Values Survey (WVS) is one possibility because it has a general question about depression,[8] although some scholars argue against using dichotomous measures concerning health assessment (Mirowsky and Ross 2002). Another concern is that the religion measures on the WVS and similar cross-cultural surveys are greatly influenced by monotheistic, membership-exclusive religions such as Christianity (cf. Tilley 2002). Japanese tend to score very low on these measures (see e.g., Altemeyer 2004; Campbell and Curtis 1994, 1996; Proctor 2006), in large part because the questions do not reflect common practices and beliefs in Japan.

This chapter offers several contributions to the literature on religion and psychological distress. First, it introduces new data from a survey of randomly selected Japanese adults that includes a battery of religion questions—some previously tested, others new—and a measure of distress that has been tested recently by several other scholars. Using these data, this study reveals several important relationships concerning mental health and other health controls that were previously untested in Japan. Results of

multivariate analyses demonstrate consistent, negative correlations between CES-D symptoms and self-reported physical health (see also Okabayashi et al. 2004) and sense of balance in life. Respondents who experienced one or more traumatic event in the past five years were more likely than those who had not to report more distress symptoms.

Furthermore, this analysis is unique in its examination of connections between religiousness and distress in Japan. For example, similar to many cross-sectional studies on U.S. populations, these findings show that religious coping is positively linked to increased reports of CES-D symptoms. More specific to the Japanese context, owning a *butsudan* has a robust, negative correlation with psychological distress yet ownership of a *kamidana* is positively connected. This study also uncovered a suppression effect concerning the belief that faith and health are related on CES-D symptoms; the measure becomes significant and positive after adding the health controls. Upon further analysis, we also learned that owning a *kamidana* reverses the effects of this worldview, and that those who maintain this belief and have experienced a traumatic event recently report fewer signs of distress than those who do not uphold this belief.

Surprisingly, belief in *kami* and *hotoke* is also positively tied to distress. In U.S.-based research, beliefs concerning God generally are negatively correlated with distress. For most Japanese, *kami* and *hotoke* are abstract non-figurative mystical beings that can be punishing or helpful, and few consider these beings as intimately concerned with their daily lives. This impression differs greatly from Christian interpretations of God as loving and concerned and embodied in human form as Jesus Christ. These divergent views concerning the divine or supernatural may explain these discrepant associations with psychological distress.

In addition to these empirical advancements, this chapter also describes and assesses the applicability of three theories that are relevant to this topic in the Japanese

context. First, I tested whether the theory of religious coping could apply in Japan. Arguably, people who rely heavily on religious coping are 1) likely to be suffering from some life stressor and are 2) likely to report comparatively higher levels of distress. This appears to be the case in this study. The second theory I tested was activity theory. Of the three theories included in this analysis, activity theory has the least empirical support. Only ownership of a *butsudan* was linked to positive well-being, and this does not necessarily imply any *active* engagement. Finally, it is evident that some of the ways Japanese structure their worlds in terms of religious beliefs also affect their mental well-being—mostly negatively.

While these findings are important, I recognize that there are certain limitations that should be addressed. For example, although the sample comes from a systematic random sample of Japanese adults, it is limited to households listed in the telephone books and there may be certain types of people who are omitted (e.g., those who do not own a telephone and those who choose to be unlisted). The data could also be enhanced by using a larger, national sample and by surveying the respondents at several points in time to make a longitudinal study. These findings may not be applicable to other geographical areas of Japan (though there is no evidence to suggest dramatic differences between Kyôto Prefecture residents and other Japanese concerning religion and psychological distress), and we cannot make causal arguments based on these findings.

Despite these limitations, this chapter offers the first quantitative examination of associations between psychological well-being and several religious dimensions in Japan. Presently, there are a handful of studies that examine religion and health in Japan; however, none focus on mental health. Overall, there is strong evidence that religiousness is associated with well-being in Japan, and as the results here reveal, these connections are positive and negative, depending on the religious dimensions examined. Still, much more

research is needed before we can fully understand these relationships, and more data is necessary to continue this type of study in a variety of cultural contexts.

ENDNOTES

[1] All models were also run using a non-logged dependent variable. Overall, there were only a few differences concerning statistical significance (see author for results).

[2] The survey also included a question about religious affiliation. Over 100 (34.07 percent, weighted) claimed to have a religion they believe in personally, an additional 46.48 percent claimed a "household religion", and the remainder denied any affiliation, personal or familial. There were no statistically significant correlations between religious affiliation and psychological well-being, thus its effects are not discussed here.

[3] Studies of U.S. populations have found similar (see e.g., Ellison et al. 2001) and opposite (see Harker 2001) relationships concerning age and psychological well-being.

[4] In a separate analysis (not shown), it was found that there is no connection between ownership of both a *butsudan* and a *kamidana* and distress.

[5] Much of the sample was deleted from these models because they do not own *butsudan* or *kamidana* (see Table 4.1). The small sample sizes may have weakened the statistical power of these variables, resulting in non-significant findings.

[6] (100*[-.009-.025]/-.009 = 411.11), where b = -.009 in a model that includes the socio-demographic controls and Faith&health but excludes the health measures (not shown here), and b = .025 as shown in Table 4.6 Model 3.

[7] Frequencies for the categories are: 'very religious' (weighted N = 18.899), 'somewhat religious' (weighted N = 49.907), 'not religious but do rituals' (weighted N = 152.293), 'not religious' (weighted N = 52.456), 'atheist' (weighted N = 39.524).

[8] See Hopcroft and Bradley (2007) for example examining cross-cultural links between religion and depression using the WVS.

Conclusion

In this dissertation I set out to test whether different aspects of Japanese religiousness are associated with subjective and psychological well-being. There are dozens of publications that address these intersections in the U.S. and a few studies that focus on samples from Europe, sub-Saharan Africa, and the Middle East. Additionally, there are a handful of studies on Japan that look more broadly at connections between religious practices and beliefs and general well-being. As noted, some scholars have also examined correlations between religiosity, giving support, and self-rated health (Krause et al. 1999b) and religiousness and hypertension after the death of a loved one (Krause et al. 2002). Still, no one has examined how Japanese religiousness is linked to life satisfaction, happiness, and psychological well-being. Socio-historical differences between the U.S. and Japan—especially regarding religiosity—lead us to expect that ties between religiousness and well-being would vary. Based on the findings of this dissertation, there are, indeed, noteworthy distinctions as well as some significant similarities.

Some of the key religious differences highlighted in this dissertation are that in Japan regular attendance at places of worship is rare, ancestor veneration and other private household rituals are common, few Japanese claim exclusive affiliation with one religious organization, and many believe in a multitude of *kami* and *hotoke*. Further, unlike the Bible's influence in the U.S., theologies and doctrines from religious texts are much less well known and discussed in Japan.

Recent political and historical distinctions have also generated different cultural interpretations of the word "religion" (or "*shûkyô*" in Japanese). These understandings complicate the scientific study of religion in Japan, arguably, more so than in the U.S. In Japan, "*shûkyô*" still implies organized religions and their teachings—aspects of

religiousness that are somewhat foreign to most Japanese. Thus, when scholars are attempting to inquire about the ritual behaviors and more traditional worldviews of the Japanese, this word poses a linguistic and methodological problem (see also Fitzgerald 2003b; Ômura 1996; Traphagan 2005). For these reasons, in my own research I have tried to use other related words (e.g., *shûkyôteki*—religious-like or *shinkô*—faith, beliefs) or I ask about specific ritual acts (e.g., festival involvement or household rites). When using secondary datasets, though, we are restricted to the language of the survey. Although this poses limitations, Chapters 1 and 3 reveal that there is a great deal to be learned from these sources as well.

CHAPTER SUMMARIES

Previous research in the U.S. (e.g., Stark and Bainbridge 1985) has revealed that the theory of deprivation helps explain why individuals join cults or newer religious organizations. Chapter 1 supports this claim to an extent by showing that individuals who claim to believe in New Religions tend to be less educated and have lower incomes and are more likely to be unemployed, in comparison with religious non-affiliates. This is not the case with Buddhist or Christian affiliates. Different aspects of socialization (e.g., gender, age, and social involvement) are strong predictors of Buddhist, Christian, and New Religion affiliation, and many studies in the U.S. have also noted such connections (cf. Miller and Stark 2002). By including comparisons of *individual* versus *household* religions, Chapter 1 also uncovers an aspect that is more specific to Japanese religiousness, and we see that there are important distinctions between these two types of affiliation. The chapter builds upon theoretical considerations concerning religious membership that are common in the U.S. and gives special attention to characteristics that are more particular to the Japanese context.

Chapter 2 focuses on household rituals, and the data come from in-depth

interviews with Japanese. Thus, findings and conclusions are more restricted to Japan and possibly other parts of Asia that maintain similar traditions (such as China, South Korea, and India). I connect this research with U.S.-based studies on a theoretical level by employing the theories of rational choice and religious coping. I also apply Bourdieu's concept of *habitus* to explain how the ritual acts themselves—regardless of underlying meanings or emotions—can impact the well-being of these individuals. This chapter reveals how theories commonly applied in the U.S., Europe, and Africa (the site of Bourdieu's first application of *habitus*) can be used to explain more culturally-specific behaviors and beliefs of Japan.

The outcome variables in Chapter 3 (life satisfaction and happiness) have been tested repeatedly in the U.S. Data restrictions limit this analysis to a dimension of religiousness in Japan that is rare; however, robust statistical associations exist between those who are "devoted" to a religion and both measures of subjective well-being. This chapter also exposes differences between Buddhist, Christian, and New Religion affiliates concerning these outcomes. Prior to this dissertation, we knew very little about Japanese religious affiliates on a national level. Chapters 1 and 3 are the first to use combined cross-sectional waves of national probability samples to examine differences and similarities among these religious groups—in general and regarding associations with life satisfaction and happiness. The fact that devotion to a religion is positively correlated with subjective well-being resonates with research on U.S. populations. By focusing on a Japanese sample, we see that such connections can be cross-cultural.

Finally, in Chapter 4 I assess links between religiousness and psychological well-being in Japan. We are fortunate to have a few more studies on this relationship outside of the U.S. or other predominantly Christian societies. Still, no one has used survey data to examine how religiousness in Japan might relate to mental health. In general, these findings

do not overlap with previous studies in the U.S., Canada, Europe, Thailand, and Iran because they reveal mainly positive connections with CES-D symptoms of distress. Types of religious coping and different worldviews and impressions of the supernatural or divine (e.g., God, *kami*, or *hotoke*) may explain some of these results. Sacred objects, such as *butsudan* and *kamidana*, are also important to this relationship in the Japanese context—providing support for the need to include aspects of religiousness that are particular to the culture being researched. In other words, if I had used the World Values Survey or if the survey I designed and administered had relied solely on questions concerning beliefs in God or gods, religious attendance, or religious affiliation, I would have excluded some of the religious dimensions that are more closely tied to psychological well-being in Japan. The results would have been incomplete and misleading because, of those measures, only belief in the existence of *kami* and *hotoke* was significantly correlated.

Taken together, these results indicate strongly that religiosity is multidimensional and that different dimensions impact Japanese well-being in diverse ways. They also provide substantial evidence for the need to be cautious when conducting cross-cultural research. In this dissertation I focus on Japan, though I discuss related influential works that have been conducted with, primarily, U.S. samples. This provided a gauge with which I could start my research and compare the results. Still, by concentrating on Japan I am able to address certain aspects of Japanese religiousness in detail and juxtapose these with those of the U.S. Further, by using interview and survey data, I am able to present a more inclusive discussion of relationships between religiousness and well-being in contemporary Japan.

As I have argued throughout this dissertation, the relationship between religiousness and well-being is important and should be studied in a number of cultural

contexts. This project aims to fill a void concerning the study of religion and health in a non-Christian, non-Western nation, and it is hoped that these findings will encourage further research on this topic in Japan and in other areas of the world.

FUTURE DIRECTIONS

Each of the substantive chapters in this dissertation offers theoretical and empirical evidence for the religion-health intersection in Japan. Each chapter also ends with a brief discussion of changes and improvements that could be made to better our understanding of this area of research. In this final section I wish to readdress some of those topics and propose several suggestions for future research.

Data Limitations

First, there are important data restrictions. Japan has been described as "fact-rich data-poor" (Brinton 2003), so why focus on Japan? In some ways, Japan resembles the U.S. and many Western European nations because it is a highly modernized, democratic nation. For decades, Japan has remained the second largest economy in the world, and its political influence is global. On a more mundane level, throughout the world people are consuming Japanese goods made by Toyota—now the highest selling automobile manufacturer worldwide, Honda, Sony, Mitsubishi, and Toshiba, and "soft culture" exports, such as sushi and entertainment products (e.g., *anime* and Wii™). Japan is not some remote, third world country with little influence over or connection with the West. Its global influence and close ties with the U.S., in particular, in conjunction with its different social structures and traditions make it an appealing and—in my opinion—highly appropriate topic of research. This is especially the case with religious studies.

One problem is that there are too few datasets that include measures of religiousness that are valid within the Japanese context. Undoubtedly, this is a major

reason why so much of what we know about Japanese religiousness comes from historical or ethnographic research. The advantage of these studies is that they provide in-depth empirical examples and often generate influential theories. On the other hand, results cannot, necessarily, be generalized throughout the nation. In order for the two methods of research to complement each other and teach us more about Japanese religiousness and its associations with health, for instance, improvements are necessary for survey research, especially.

To address this limitation, it is essential to construct survey questions that can be added to ongoing large national surveys. The survey I designed for Chapter 4 is an important step in this direction. Indeed, it was because of data restrictions that I fielded the survey. The next step is to convince one of the major surveys of Japan, such as the JGSS, National Family Research of Japan (NFRJ) survey, or the Nihon University Japanese Longitudinal Survey on Aging (NUJLSA), to add these questions. The latter survey is particularly appealing because it is a national longitudinal study. This panel study would allow scholars to explore long-term effects of religiosity on health, among other topics. In recent years, U.S. scholars have taken advantage of similar panel surveys and have found robust connections between religious attendance and reduced mortality, for example (see e.g., Hummer et al. 1999; Musick, House, and Williams 2004; Rogers, Krueger, and Hummer 2008).

Though it is unlikely that a sufficient sample of Japanese in the NUJLSA regularly attend religious services, it is possible that frequent household ritual participation or certain beliefs concerning *kami* and *hotoke* are linked with long life. Japanese have the longest life expectancies on earth, and it would be interesting to discover whether religiousness is tied to mortality and if that association is positive or negative. As Chapter 4 reveals, such actions and beliefs are positively correlated with

psychological distress, but we cannot conclude that they are similarly tied to mortality.

Another benefit of such a study is that it would allow us to make cross-cultural comparisons concerning the effects of religiousness on mortality. Undoubtedly, we would find critical social differences that explain the findings—differences concerning religiousness and attitudes towards death, for instance. As mentioned, instead of focusing on religious attendance, more common rites in the home should be a focus. Also, there are important distinctions concerning death. For many Japanese, death does not separate the individual and the family. Death tends to be viewed as a new transition rather than a complete disconnection of the living and the dead (Traphagan 2004). In Chapter 2, I address this in more detail in my discussions of ancestor veneration. Such attitudes towards death and their associated rituals may act in the same manner as church attendance does for U.S. Christians—they may cause delayed mortality in comparison to those who do not share these views or who do not regularly practice these rituals.

Of the datasets mentioned above, only the JGSS presently includes questions on religiousness, and I have discussed some of the constraints of those measures. Recently, I submitted several questions from this study's survey to the JGSS and the NFRJ. The JGSS declined to add the questions, and I am still waiting to hear from the NFRJ. Both include national probability samples, but the latter contains more questions on health and is, therefore, more appealing to the type of research addressed in this dissertation. After I have published the results of this dissertation, I intend to (re)submit several questions from my questionnaire to the JGSS and NUJLSA to make it possible for us to examine ties between some of the more common aspects of Japanese religiousness and a variety of social forces. It is also hoped that, in the meantime, social scientists will be able to develop other questions that were not included in my survey. There are, undoubtedly, a number of dimensions of religiosity that are highly correlated with many other aspects of

Japanese life that deserve our attention in the future.

Adding to What's Already There

In addition to submitting more valid religion measures to on-going surveys, there is ample room in the study of religion in Japan for surveys and different analytical and methodological techniques. The survey I administered for this dissertation enabled me to explore associations between several dimensions of religiousness and well-being, and despite the somewhat small sample size, the findings are important and help advance the study of religion and well-being outside of the U.S. Admittedly, though, there is much more we could do to improve this survey. Although I received financial support from the National Science Foundation, Religious Research Association, Society for the Scientific Study of Religion, and Asian Studies Department at The University of Texas at Austin, I was greatly limited by the number of respondents I could reach and the amount of time I could spend in Japan.

In the future, I intend to apply for major funding from sources such as NSF or the John Templeton Foundation. With more substantial funding, I would be able to conduct a long-term project in Japan that combines the benefits of qualitative research methods (such as historical reviews, focus groups, and in-depth interviews) and large-scale face-to-face surveys. Ideally, the project would be a panel study that includes a nationally stratified random sample (see e.g., Kalton 1983) of Japanese adults. The benefit of this design is that it would enable me to address many of the questions that studies such as this dissertation have only begun to answer. By increasing the sample size to a minimum of 1,500 respondents I will be able to retest the significant *and* non-significant findings of this research with a much larger national sample. By including multiple waves of panel data, I would be able to assess direct and indirect effects of religiousness on a variety of health outcomes (including mortality and physical and mental health). Recent works by

Musick and Worthen (2008) and Regnerus and Smith (2005) provide critical analyses of the religious causation framework versus selection effects, and studies such as these are useful models for the design of future research projects on religion and health in Japan and elsewhere.

The qualitative data would be used to provide detailed empirical examples that teach us more about common Japanese practices, beliefs, and membership. For instance, one topic that this dissertation was unable to address in detail concerns Japanese who identify themselves as "Buddhist". By specifically targeting these individuals and talking with them about their practices and worldviews, we will be able to understand better who these individuals are and what distinguishes them from other Japanese who also conduct Buddhist rites and maintain similar worldviews. Chapter 1 reveals who Japanese lay "Buddhists" are in comparison to those who do not believe in a religion, but we need to know more about these individuals. There is also a need for nationwide studies on New Religions and Christianity in contemporary Japan. There are a few influential publications on New Religions (see Davis 1980; Hardacre 1986; McFarland 1967; Shimazono 2004) but a more noteworthy dearth in the literature on the Japanese Christian laity (see Mullins 1998).

Interviews with dozens of Japanese will also prove invaluable in the construction of a national survey, the results of which can be generalized throughout the nation. Research in the U.S. on survey design and administration (e.g., Converse and Presser 1986; Fowler 1993; Groves et al. 2004) stresses the importance of including expert reviewers as well as the thoughts and experiences of individuals who are in one's sampling frame in the design of a survey. To obtain insights from the latter, focus groups and in-depth interviews are common. For this dissertation, I incorporated expert reviewers as well as group meetings and semi-structured interviews, and I found these methods highly

productive and useful. Moreover, the data generated from such methods can stand alone (see Chapter 2), and there are a number of influential ethnographic studies on Japanese religiousness that provide excellent models for future research on new and under-researched themes (see e.g., Kawano 2005; Martinez 2004; Traphagan 2004).

Concerning survey question design, there are several helpful models in the U.S. that are specific to religion. For instance, Idler and colleagues (2003) provide a list of questions and theoretical approaches to the study of religion/spirituality and health in the U.S. Though the applicability of these questions in the Japanese context is limited (cf. Traphagan 2005), they can be altered to more appropriately measure the Japanese experience. "Concern for others" is one theme Idler et al. (344) address that Traphagan (2004) argues is a core aspect of religiousness in Japan. Rather than focus on "charitable acts" (345) as expressions of such concern, however, in Japan this might be measured via attitudes towards one's ancestors or frequency of ancestor veneration. Certainly, as Traphagan (2005) suggests in his discussion of Idler and colleagues' paper, in Japan *ritual* needs to be the center of scholarly attention. Though certain beliefs and attitudes towards *kami* and *hotoke* should not be overlooked (see e.g., Chapter 4 and Kaneko 1990), ritual behaviors are often more common and more relevant measure of "religiousness" in Japan than religious affiliation or cognitive structures or theological interpretations of forgiveness, God/gods, life, and the afterworld.

Additionally, scholars of religion and coping suggest expanding the types of questions asked to include more than just measures of *how* religious one is. For example, Pargament and Ano (2004) recommend asking questions about *what kind* of mystical forces may be related concerning religious coping and well-being (e.g., a helpful god versus a reprimanding one), *when* these ties become most important (during a stressful event or after and for how long after), *where* they matter (in private or in public settings), and *why*

they matter (e.g., "to find meaning, to gain control, to achieve life transformation", 119). Such broad recommendations are helpful in the addition of religious measures in many cultures, including Japan, provided they are tailored appropriately for each society.

Other relevant studies include Underwood and Teresi's (2002) test of the Daily Spiritual Experience Scale (DSES) and Krause's (2002a) explanation of his design of closed-ended survey measures of religion for older Americans. Both studies recommend focus groups and interviews as critical starting points for survey question design. Further, Krause explains the importance of cognitive interviews (see also Groves et al. 2004) to ensure that the subjects understand the questions as intended by the survey designer. Additionally, these studies provide specific examples of the steps that are necessary to create quantitative measures of religiousness that are likely to have good psychometric properties. These are the steps I followed in my research for this study and guides I intend to continue following in the future.

Other Topics of Interest and Relevance

This dissertation focuses on subjective and psychological well-being. Future studies should expand this area of research in Japan by examining links between religiousness and physical health and—as mentioned—mortality. In one study on physical health, Krause and colleagues (2002) found that more religious older Japanese enjoyed lower levels of hypertension after the death of a loved one in comparison to respondents who were comparatively less religious. Other than this, we know very little about how religious practices and beliefs in Japan are associated with physical health. Do specific practices have short- or long-term effects on the physical health of Japanese? Are there connections between more global assessments of well-being such as self-rated health and religious rites and beliefs in Japan? Future research needs to examine these relationships as well.

Another area that deserves our attention is the link between social support and religiousness. In a recent publication based on my Master's Thesis (Roemer 2007), I discuss ties between ritual involvement in one of Japan's most famous and elaborate festivals with different forms of social support. The men I interviewed spoke at length about the sense of community, belonging, and spiritual support they received because of their participation in this month-long annual festival. Other studies on Japanese festivals have noted similar connections (e.g., Schnell 1999), yet this was the first study to focus on social support as an outcome of or correlate with festival involvement. The question that remains is: are there similar relationships in other major festivals in Japan? Because many of the types of interactions of my sample and rituals they performed resonate with those of most festivals, it is likely that social support is not limited to this context. There may be important distinctions, though, for festivals in rural areas that are suffering from depopulation and are struggling to raise financial support and to recruit new members so they can continue the festival (see Kawano 2005). Such differences have not been researched and may be critical for our understanding of how these relationships exist and how influential they are in the lives of the thousands of Japanese who play such important community roles in these festivals.

Concerning religion and health, two other research topics that require further attention are religious coping and tests of the stress-buffering hypothesis. In Chapter 4, I found that religious coping was positively correlated with psychological distress. The data are cross-sectional, though, so we cannot tell what is the causal agent in this association. First, we should improve our measure of religious coping to include other dimensions (see Pargament 1997 for U.S. based overview of religion and coping). Second, to best understand this link we need to employ longitudinal data. This will allow us to assess the relationship at multiple points in time—ideally, three or more. In the U.S.,

studies on religion and coping that use panel data indicate that religious coping is connected with positive well-being (see e.g., Pargament and Ano 2004). In particular these links have to do with beliefs concerning God and help from God.

As discussed in Chapter 4, the Japanese interpretation of the supernatural or mystical differs greatly, and there is reason to believe that a long-term study of religion and coping would generate opposite results from U.S.-based research. In the cross-sectional analysis presented here, all but one of the variables in the religious coping index is positive. As an index, it is coded so that higher scores indicate higher levels of belief. In most cross-sectional studies in the U.S., positive coping devices tend to be associated with positive well-being, and it is the negative measures that are negatively correlated. The results of Chapter 4 are interesting because they contradict U.S.-based research, and it is possible that such negative connections would remain in a longitudinal analysis as well.

Finally, it would also be beneficial to test further the stress-buffering hypothesis. According to Ellison (1994), religion can buffer against life stressors that result in poor mental or physical health, for instance. Certainly, stress in Japan is a common cause of worsened health, and as I argue in Chapter 2 the frequent practice of household rituals can be a means of stress release. Several individuals in my sample discussed how important these acts are in their daily lives and how helpful they are in times of stress. Although quantitative analyses did not support this hypothesis with the measures I used with the JGSS (Chapter 3) and with the survey I created (Chapter 4), it is possible that other measures are necessary to detect such statistical relationships. One way I tested this idea in Japan was to see if interactions between religion and the experience of one or more traumatic events were correlated with the well-being outcomes. Both surveys imitate the U.S. General Social Survey's question on traumatic experiences (in the past five years),

and perhaps it is only more recent tragedies (e.g., in the past year) that will be relevant in this type of study. Also, I examined whether the cross-products of religion and unemployment and religion and poor self-rated health indicated a buffering effect of life stressors on well-being; however, I did not find any statistical support for this hypothesis.

As previously mentioned, Krause and colleagues (2002) found positive links between religiousness and comparatively lower levels of hypertension among Japanese elderly. Their paper provides one example of how the stress-buffering hypothesis can be applied in the Japanese context. Additionally, it is plausible that a panel study is needed to discover significant interactions between religiousness, stress, and well-being in Japan. Perhaps these correlations are most noteworthy over time. Future studies that include cross-sectional and longitudinal data are needed before we can rule out this hypothesis in the Japanese context.

Broadly speaking, other important interactions to examine in future research on religion and well-being in Japan include age cohorts and gender differences, for example. In one cohort study on religion in Japan, Holland, and the U.S., Sasaki and Suzuki (1987) concluded that Japan is the only country of the three that has remained relatively stable over the decades. The religious measure they were limited to ("religious belief"), however, is not the best measure and therefore these results must be taken with caution. Moreover, their study does not address health at all. In this dissertation, I tested for age-related differences and found only a few non-linear relationships. For now, we cannot tell whether religious practices and beliefs in Japan impact different age cohorts differently, and we will need multiple waves of panel data with improved measures of religiousness before we can draw any conclusions in this area.

Similarly, we do not know enough about gender differences. We know that women

are more likely than men to conduct household rituals and that men typically are more involved in public rituals (see Martinez 2004; Traphagan 2004), but we do not know if there are different well-being outcomes based on these gendered roles. Also, it is plausible that it is the specific rituals and not the sex of the ritual enactor that explains such relationships. Other than the findings in Chapters 3 and 4, however, few other studies have specifically addressed such distinctions concerning well-being. Krause and colleagues (1999b) found that older men who were religious were more likely to give social support. This was not the case for women. They hypothesized that this was because of gendered socialization: Japanese women are raised to be nurturers and are more likely to give support regardless of religiousness. Men, on the other hand, are not as inclined to provide support for others, and as the results of their study indicate, frequency of certain religious practices (including ancestor veneration) are correlated with giving social support among older men. In the future, I hope to explore these distinctions further and employ other measures of religiosity to provide a more comprehensive portrayal of health effects that differ based on gender and gendered roles.

Thinking Beyond Japan? A Note of Caution Concerning Cross-cultural Research

Throughout this dissertation, I have argued for the need to examine the religion-health relationship outside of the U.S. and with populations that are not predominantly Christian. In the same manner that I contend we should not assume the studies from the U.S. and Europe can be applied to Japan, we should not generalize the findings in these chapters beyond Japan. At most, we can hypothesize how these relationships might exist in other similar cultures, such as parts of China, India, and South Korea, where household rituals remain common and certain historical religious traditions are similar. Although it is tempting to assume the connections found in this dissertation exist in other parts of Asia, we must be cautious when making cross-cultural claims.

From its origins, the scientific study of religion has included cross-cultural analysis. Early scholars such as Durkheim, Marx, and Weber all provided examples from different countries in Europe, North America, Asia, and Africa. The rationale behind such comparisons is the same now as it was over a century ago: by researching religious beliefs and behaviors in multiple societies we are able to convey a more comprehensive interpretation of "religion" in general. Such studies have led scholars to agree that religion is multidimensional; however, few agree upon a definition that suits all contexts. Nonetheless, overwhelmingly scholars agree that religion is a highly potent social force in cultures across the globe, and "religion" has been linked with wars, peace, political and economic changes, family structures and parenting styles, well-being, and mortality, as well as individual and collective attitudes and behaviors.

To reveal how these forces work, scholars of today look to the models of early social scientific research, and many have relied on large international datasets to compare religious trends across cultures. Although these works provide important examples of religion's influence in various social contexts, ultimately, their conclusions are limited by the data. This is, by no means, a concern for religious studies alone; all secondary research is limited by the questions included on the surveys employed. In the case of cross-cultural survey-based research on religion, the primary concern is that questions tend to rely on a 'Western' conceptualization of religion, and culturally-specific questions about key religious practices and beliefs are missing. The major concern here is that ignoring such cultural variation and forcing different societies into a one-size-fits-all model of religiousness is highly likely to result in invalid interpretations and misleading conclusions.

With the introduction of the World Values Survey (WVS), the number of studies that explore different effects and outcomes cross-culturally increased rapidly. In the case

of religious research, scholars have also relied on the 1998 International Social Survey Project (ISSP) to conduct research that compares social influences of religiousness on a host of societies. Some studies limit their comparisons to North American or European countries. There are also a number of works in top-rated journals that use the WVS and ISSP and incorporate religion measures in their cross-cultural analyses and compare the West with Japan and other Asian nations. For instance, Curtis, Grabb, and Baer (1992) use religious membership as their religion control in a study of voluntary association membership, and Japan is the only non-Western comparison nation. Others force Japan and other Asian nations into categories that are inappropriate or, at the least, misleading. McCleary and Barro (2006), for example, place Japan in a broad and nebulous category called "Eastern religions", and Inglehart and Baker (2000) label Japan, South Korea, and Taiwan as "Confucian", an equally ambiguous and problematic term.

Although the theoretical and empirical importance of religion in these studies varies (in some cases, religion is a key predictor or outcome and in others it is a control variable), when measuring "religion" these studies are forced to rely on a model that emphasizes belief in a concerned, omniscient God/god(s) and practices associated with and membership in organized religious institutions. Further, they tend to force cultures into categories for comparative purposes, despite the inappropriateness of these labels. Such measures and groupings are unsuitable in Japan and elsewhere, and for this reason future research needs to give this more attention than a footnote or a brief comment in the Discussion section.

For these reasons, I do not attempt to generalize the findings of this dissertation to other societies. Admittedly, there are important religious similarities in Japan, China, South Korea, and India, for example. However, there are obvious distinctions that cannot be overlooked. Moreover, there are differences concerning well-being per society that

must be acknowledged as well. Such variation concerning both the independent and dependent variables confound simple analysis and require an in-depth understanding of what "religion" and "well-being" are in each society included in a cross-cultural study.

Before we completely disregard such research, there are a few options worth mentioning here. First, we can spend much more time discussing the differences that are present in each culture. That is, scholars should be more explicit in describing the cultural diversity of these concepts and carefully address how these variations may lead to different interpretations of the results. For instance, although few Japanese are religious members in the WVS and ISSP in comparison to Americans and most Europeans does this mean that they are "less religious"? No, it simply means that fewer Japanese claim religious membership, and reasons for this and related implications concerning the research question should be discussed (see Chapter 1). The concern with this option is that it may be impossible to complete such a study in a journal length article, especially if we include more than a few societies. The question that remains then is: how informative are these studies if they do not address these important cultural distinctions beyond rudimentary findings?

Another option—and in my opinion a preferred one—is to compare societies by *levels* of religiousness based on how each culture defines "religiousness". In other words, rather than compare the same measure across all nations, employ measures that are the most valid examples religiousness for each culture and compare those levels. In Japan, we might define the "religious" as those who frequently conduct certain rituals, whereas in the U.S. the "religious" would be determined by those who maintain strong beliefs in God, for instance. We can then compare these levels, or degrees, of religiousness per society. Although the measures differ, we will be able to achieve the ultimate objective: to compare religiousness per country. "Religiousness" varies per society, and it is

essential that we recognize these differences in cross-cultural research as well and avoid forcing every culture into an oversimplified uniform model.

Admittedly, there are concerns with this type of research as well. Most notably, such studies would require the authors to be intimately familiar with how each society included in the research defines religiousness. Further, we are limited greatly by data. How can we compare levels of religiousness in Japan with other nations if there are no questions on household rituals or beliefs concerning *hotoke* as well as *kami*? As an immediate solution, one option is to choose measures for which each nation has the highest frequencies. For instance, if 51% of the Japanese sample reported belief in *kami* but only 12% claimed to be religious members, we could use the former measure. Still, this would not the ideal option because it does not include an assessment of ritual involvement, and belief in *kami* is not the best measure of religiousness—it is only the *better* measures of these two. Only if surveys such as the WVS expand their religion sections and include culturally-specific questions as well will we be able to carry out cross-cultural studies that acknowledge and reflect these important social differences.

Another issue that requires further attention is creating an appropriate definition of "religion" in Japan—and elsewhere. In this dissertation, I address many of the concerns that confound simple definition, especially within the framework of monotheistic, doctrine-based examples such as Christianity, Judaism, and Islam. To a great extent, the problem boils down to a difference between etic and emic interpretations of what can be labeled "religious" in Japan. From an etic, or outsider's, perspective Japanese *religions* are best described as institutions, such as Buddhism, Shintô, Christianity, and New Religions. In a sense, this "experience-distant" (Geertz 1983:57) interpretation focuses on distinctions between these religions to explain their historical roles as social forces in Japanese society.

The emic (or native, "experience-near") explanation, though, does not focus on differences among these religions as much because many Japanese are not aware of where Buddhism begins and Shintô ends or what god is Buddhist or Shintô, and even fewer are familiar with specific teachings of these religions. Of course, it is clear to most that funeral ceremonies are most frequently Buddhist and purifications and festivals are most often associated with Shintô shrines. Also, Christian and New Religions are more exclusive and, thus, distinguishable from other religions.

Such confusion is also apparent when studying the non-organized aspects of what scholars often refer to as "religious". Household rituals, such as ancestor veneration and *kamidana* rites, are only loosely affiliated with Buddhism and Shintô, and many Japanese refer to these acts as "customs" or "traditions", as noted several times in this dissertation. What differentiates such "customs" from the traditional rituals involved in flower arrangement (*ikebana*) or tea ceremony (*sadô*), for example? Here is where an etic—or outside scholar's—interpretation may not coincide with the emic—or Japanese individual's—perspective. As scholars we may argue that because household rites involve *kami* and *hotoke* (i.e., supernatural and mystical beings), they are comparatively more "religious", or less secular, than the rituals of a tea ceremony. Kawano (2005) describes the focus of veneration (i.e., *kami* or *hotoke*) to illustrate the difference between what she calls a "religious" ritual versus a non-religious one. The difference between bowing before one's ancestors at the *butsudan* and bowing to one's boss, for example, is that the former is a sign of respect for the dead and these dead relatives are distinguished by their mystical or non-corporeal state.

Do Japanese see it this way? Certainly, many Japanese—including the men and women I interviewed and described in Chapter 2—do interpret acts of respect before *kamidana* or *butsudan* differently than reverence for their bosses or another person who

is socially superior to them. Others, on the other hand, may not claim such stark distinctions, and these individuals are likely to place *kamidana*, *butsudan*, shrine, and temple rites in the same category as rituals of flower arrangement and tea ceremonies.

To address this methodological issue, future research on religiousness in Japan should include more studies on the "non-religious", self-described atheists, and those who do *not* conduct household rituals frequently or make regular visits to shrines and temples. These individuals make up a majority of the population, and it is imperative that we understand better their attitudes towards and interpretations of what scholars often call "religious". By juxtaposing their experiences with those for whom these behaviors and beliefs *are* "religious", we will provide a more inclusive description of both the secular and the sacred in contemporary Japan (see also Fitzgerald 2000, 2003b). Further, it is important that research concentrate on the "experience-near", or emic, approach to the study of everyday religiousness.

CONCLUDING REMARKS

This dissertation reveals robust positive and negative associations between religiousness and well-being in Japan, and there are important similarities between these findings and U.S.-based research on this topic. There are also significant theoretical and empirical cultural differences that are addressed. The similarities illustrate that this type of research should be conducted outside of the United States and with non-Christian samples. The differences demonstrate the need for caution in generalizing findings across cultures. To provide a more comprehensive interpretation the religion-health relationship, future studies should build upon this study and others, and scholars should work to improve on-going datasets and to combine methods of research. The next steps (discussed in the sections above) are to expand our knowledge of these relationships and to explore links between religiousness and other aspects of society in Japan and elsewhere. In the

meantime, this study helps to fill a gap concerning research on religiousness and well-being in contemporary Japan.

Appendix A: Interview Questions

Note: The list below represents the main questions that were asked in the interviews. Because the interviews were semi-structured, I did not ask all informants all of these questions. This list is meant to provide a basic overview of our discussion topics.

1) In general, what do most Japanese do for their "health"?
    Probes: What do you do? (e.g., exercise, diet, sleep)
        Is "balance" important?
        Do you have an *ikigai* (socially engaged activity/hobby)?

2) What (other) activities are you involved in? For example, clubs, organizations, hobby groups.
    Probes: How often do you typically get together with members of that group(s)?
        Do you feel you get any kind of support or encouragement from them?
            -Explain
        Do you think these exchanges/support are related with your health?

3) Next, in life everyone has traumatic experiences (such as a major illness or injury, the death of a loved one, divorce, unemployment, etc.). When you experience any of these, in general, how do you cope with them?
    Probes: Whom do you talk to?
        Do you pray? To whom? Why?
        When you pray, do you feel close to or think about your family and friends?
        Do you feel this brings peace to your *kokoro*/is peaceful?

4) To continue, do you make offerings, say prayers, etc. at a *butsudan* or *kamidana*?
    Probes: How often?
        Who else in your family does these rituals?
            -Who does them most frequently?
        When you ask for something from your ancestors (*senzo*) or *hotoke* do you feel as they you are heard/that something will happen?
        Do you feel these rituals bring peace to your *kokoro*/are peaceful?
        Do you think these actions are connected to health?

5) Do you belong to a religion or would you say you are devoted?
    Probes: What religion? Is it a household religion or one you belong to/believe in?
        When did you join? Explain that process/experience
        How often do you get together with other members?
        In what capacity? (e.g., personal visits, group worship, etc.)

Tell me about some of the main practices or beliefs (doctrine, theology) of this religion?
Do you read sutras, the Bible, etc.?

6) Next, I'd like to talk about *kami* and *hotoke*.
Probes: What is the difference between *kami* and *hotoke*?
How are they similar?
What is the difference/what are similarities between ancestors (*senzo*) and *hotoke*?
Do you think they (*kami*, *hotoke*) protect you?
Do you think they can curse you?

Appendix B: Interview Informant Survey

Note: These questions and answer categories are not in the final format. All surveys were administered in Japanese.

1) List the year in which you were born.

2) Which of the following best describes your present employment status? Circle all that apply.

1 Executive / Manager 2 Regular employee 3 Part-time employee
4 Dispatched employee 5 Self-employed 6 Work from home
7 Retired 8 Primarily engaged in housework 9 Student
10 Unemployed 11 Other (Please explain)

3) What is the highest level of education you achieved/graduated from?

1 New system-middle school; Old system-primary school
2 New system-high school; Old system-middle school, high school, girls' school, technical high school
3 New system-technical school
4 New system-junior college; Old system-high school, technical school
5 University
6 Other (explain)

4) Overall, how would you rate your physical health in the past year?

1 Excellent 2 Good 3 Can't say either way 4 Poor 5 Very bad

5) Using the scale below, where would you place yourself in comparison to others in Japanese society?

1 Upper 2 Middle-upper 3 Middle 4 Middle-lower 5 Lower

6) Please choose from the response(s) below to indicate which most closely reflect your personal religiousness (such as household ritual participation, shrine/temple/church visits, praying or beliefs). You may choose more than one response.

1 Very religious 2 I have a religion/belong to a religion.
3 Somewhat religious 4 I'm not religious, but I conduct certain rituals and pray
5 I'm not religious 6 I'm an atheist

Appendix C: Health and Faith Survey & Codebook

I. Survey Information

A. Total mailed: 600

B. Total Sample: 333 respondents

C. Response Rate: 55.50% (333 / 600)

D. Survey dates received

Date	Frequency	Percent	Cumulative Frequency	Cumulative Percent
August 3	12	3.60	12	3.60
August 6	111	33.33	123	36.94
August 7	42	12.61	165	49.55
August 8	20	6.01	185	55.56
August 9	13	3.90	198	59.46
August 10	7	2.10	215	64.56
August 17	1	0.30	216	64.86
August 19	56	16.82	272	81.68
August 20	13	3.90	285	85.59
August 21	6	1.80	291	87.39
August 22	4	1.20	295	88.59
August 24	2	0.60	297	89.19
August 27	8	2.40	305	91.59
August 31	22	6.61	327	98.20
September 3	9	2.70	207	62.16
September 6	1	0.30	208	62.46
September 15	5	1.50	332	99.70
December 21	1	0.30	333	100.00

II. Survey Questions and Responses

A. Social involvement and health 社会活動と健康

1. In general, about how often do you meet with or participate in any of the following groups, clubs, or organizations? Circle the most appropriate responses. Circle, "NA" (not applicable) if you do not participate in the groups listed.
あなたは、以下の（1）ー（7）にあげる会、グループ、団体などの集まりに、普段どのくらい参加していますか。それぞれについてあてはまる番号を○で囲んでください。なお、そうした会や団体に属していない場合には、６「該当しない」に○をしてください。

Note: Statistics below display Frequencies (top number) and Percentages (bottom number) for each variable. Percentages do not *include missing data (MD) and are based only on those who answered each question. All frequencies and percentages are based on* unweighted *data.*

	1/ Week 週に１回以上	2-3/ Month 月に２−３回	1/ month 月に１回	Several /year 年に数回	Never 全くなし	NA 該当しない	MD
1) Political Associations 町内会や自治会	10 3.42%	14 4.79%	26 8.90%	148 50.68%	48 16.44%	46 15.75%	41
2) Sports groups or clubs スポーツ関係のグループや団体	40 13.94	16 5.57	21 7.32	43 14.98	66 23.00	101 35.19	46
3）PTA, Women's associations, Elderly associations PTA・婦人会・老人会など	6 2.17	10 3.62	17 6.16	49 17.75	575 27.17	119 43.12	57
4）Business/Economic organizations 経済関係の団体や会	2 0.75	7 2.62	11 4.12	26 9.74	79 29.59	142 53.18	66
5）Hobby groups or clubs (choir, poetry, photography) 趣味の会（合唱・俳句・写真など）	26 9.25	24 8.54	24 8.54	31 11.03	71 25.27	105 37.37	52
6）Religious groups, shrines, temples, churches, etc. 宗教の団体、神社、お寺、教会など	9 3.17	12 4.23	21 7.39	87 30.63	60 21.13	95 33.45	49
7) Others　その他	5 2.98	4 2.38	4 2.38	16 9.52	41 24.40	98 58.33	165

2. How much satisfaction do you get from the following areas of life? Answer according to the example below by circling the appropriate number.
生活面に関する以下の項目について、あなたはどのくらい満足していますか。回答例のように番号に○をつけてください。

	Satisfied 満足				Dissatisfied 不満	
	1	2	3	4	5	MD
1) Place you live 住んでいる地域	61 18.71	124 38.04	102 31.29	33 10.12	6 1.84	7
2) Leisurely time 余暇の過ごし方	37 11.64	97 30.50	132 41.51	40 12.58	12 3.77	15
3) Family life 家 庭 生 活	59 18.38	113 35.20	114 35.51	23 7.17	12 3.74	12
4) Household budget 現在の家計の状態	33 10.34	71 22.26	131 41.07	60 18.81	24 7.52	14
5) Friendships 友 人 関 係	47 14.55	111 34.37	139 43.03	21 6.50	5 1.55	10
6) Health 健 康 状 態	17 5.20	54 16.51	126 38.53	94 28.75	36 11.01	6

3. Some people feel they have complete free choice and control over their lives, and other people feel that what they do has no real effect on what happens to them. Please use the scale to indicate how much freedom of choice and control you feel you have over the way your life turns out?
人生は自分の思いどおり自由に動かすことができるという人もいれば、どんなにやってみても自分の人生は変えられないという人もいます。あなたは、ご自分の人生をどの程度自由に動かすことができると思いますか。あてはまる番号に○をしてください。

I have control 自分の人生は自由になる				I don't have control 自分の人生は自由にならない	
1	**2**	**3**	**4**	**5**	**MD**
19 / 5.76%	76 / 23.03%	111 / 33.64%	107 / 32.42	17 / 5.15%	3

4. How would you describe your physical health right now?
あなたの現在の身体の健康状態は、いかがですか。あてはまる番号に○をしてください

Good 良い				Bad 悪い	
1	**2**	**3**	**4**	**5**	**MD**
15 / 4.66%	67 / 20.81%	110 / 34.16%	97 / 30.12%	33 / 10.25%	11

5. During the last five years how many traumatic events (such as divorce, unemployment, serious injury, death of someone close to you) have happened to you? (Circle the appropriate number.)
過去５年に、深く心に傷を受けるような衝撃的なできごと（例えば、離婚、失業、大きな病気やケガ、身近な人の死）を何回経験しましたか。

None なし	**One１回**	**Two ２回**	**Three ３回**	**Four or more ４回以上**	**MD**
91 / 28.26%	84 / 26.09%	78 / 24.22%	44 / 13.66%	25 / 7.76%	11

6. During the past month, did you give or receive any of the following kinds of support or assistance from friends or others you know? Please choose from the following options concerning amount of support *given* and amount *received*.
この１ヶ月の間に、あなたは友人や知人の方と、支援や援助のやりとりがどのくらいありましたか。 以下の(1)ー(4) について、それぞれの支援や援助をしたこと・受けたことについて、あてはまる番号に○をしてください。

	3+/ Week 週に ３回以上	1-2/ Week 週に １−２回	2-3/ Month 月に ２−３回	1/ Month 月に １回	Never 全く ない	MD
1) Financial　金銭						
a) Gave 自分が支援・援助したこと	2 0.65	4 1.31	8 2.61	49 16.01	243 79.41	27
b) Received 支援・援助を受けたこと	4 1.32	0	5 1.65	21 6.93	273 90.09	30
2) Consolation / Advice 相談・話相手						
a) Gave	8 2.60	22 7.14	46 14.94	73 23.70	159 51.62	25
b) Received	3 1.00	11 3.68	9 3.01	45 15.05	231 77.26	34
3) Everyday living 日常の生活のこと						
a) Gave	9 2.98	10 3.31	20 6.62	55 18.21	208 68.87	31
b) Received	5 1.67	6 2.01	17 5.69	31 10.37	240 80.27	34
4) Other その他						
a) Gave	2 0.71	6 2.14	10 3.56	38 13.52	226 80.43	52
b) Received	2 0.72	3 1.08	10 3.61	15 5.42	247 89.17	56

7. During the past month, how much balance in your life did you have concerning your free time (for hobbies, etc.) and other time (such as work and household responsibilities)?
この１ヶ月の間に、自分自身の個人的な時間（興味など）とそれ以外の時間（例えば、仕事や家族生活など）との両立あるいはバランスがどのくらいできていましたか。

1 I had balance
出来ていた 27 / 8.41%
2 If I had to choose one, I'd say I had balance
どちらかといえば出来ていた 40 / 12.46%
3 Can't say either way
どちらともいえない 67 / 20.87%
4 If I had to choose one, I'd say I did not have balance
どちらかといえば出来ていなかった 134 / 41.74%
5 I did not have balance
出来ていなかった 53 / 16.51%

8. This next question is about your psychological or mental state *during the past week*. How often did you experience each of the following? Circle the appropriate numbers for each question.
この1週間のあなたの体や心の状態についてお聞きします。以下のような気分やことがらをどのくらい経験しましたか。

	Never 全く なかった	1-2 days 週に １－２日	3-4 days 週に ３－４日	Almost Daily ほとんど 毎日	MD
1) I was bothered by things which usually don't bother me ふだんは何でもないことをわずらわしいと感じた	165 53.05	116 37.30	14 4.50	16 5.14	22
2) I felt that I could not shake off the blues, even if my family or friends cheered me up家族や友達から励ましてもらっても、気分が晴れない	239 77.85	48 15.64	8 2.61	12 3.91	26
3) I felt that everything I did was an effort何をするのも面倒と感じた	159 53.00	100 33.33	23 7.67	18 6.00	33
4) I felt that everyday was fun 「毎日が楽しい」と感じた	74 26.26	94 30.82	80 26.23	57 18.69	28
5) I felt satisfied with life 生活について不満なく過ごせた	65 20.63	57 18.10	80 25.40	113 35.87	18

6) I felt fearful 何か恐ろしい気持ちがした	245 79.80	42 13.68	13 4.23	7 2.28	26
7) My appetite decreased 食欲が落ちた	228 73.31	52 16.72	13 4.18	18 5.79	22
8) I talked less than usual ふだんより口数が少なくなった	225 73.05	52 16.88	19 6.17	12 3.90	25
9) I felt lonely without company 一人ぼっちで寂しいと感じた	257 81.33	36 11.39	11 3.48	12 3.80	17
10) I felt sad 悲しいと感じた	247 79.17	43 13.78	10 3.21	12 3.85	21
11) I felt depressed 憂うつだと感じた	200 64.52	75 24.19	17 5.48	18 5.81	23
12) I couldn't concentrate on things 物事に集中できなかった	169 54.34	105 33.76	16 5.14	21 6.75	22

9. Do you have an *ikigai* (group activity/social commitment/raison d'être)?
あなたは、現在「生きがい」といえるものをお持ちですか。

1 Not really 特にない	180 / 57.51%
2 Yes (describe) ある（具体的にご記入ください）	133 / 42.49%
MD	20

Section B: Faith and Religious Customs 信仰や宗教的な習慣など

10. Do you have a *butsudan* (ancestral/Buddhist altar) in your home?
あなたが現在住んでいるお宅に仏壇をお持ちですか。

1 Yes はい	113 / 34.88%
2 No いいえ	211 / 65.12%
MD	9

11. (If you answered “yes” to number 10), about how often do you worship or pray or make offerings at the *butsudan*? (Circle the appropriate response.)
（問１０番の答えが「はい」の方へ）あなたは、ふだん、お宅の仏壇をどれくらい拝んだり、祈ったり、お供え物を捧げたりしますか。あてはまる番号に○をしてください。

1	More than once/day　一日に数回	38 / 18.01%
2	Almost daily　ほぼ毎日	100 / 47.39%
3	4-6 times/week　週に４－６回	8 / 3.79%
4	1-3 times/week　週に１－３回	18 / 8.53%
5	Several times/month　月に数回	23 / 10.90%
6	Several times/year　年に数回	19 / 9.00%
7	Never　全くしない	5 / 2.37%
MD		122

(MD includes those who do not have a *butsudan* from question 10)

12. When you pray or make offerings at the *butsudan* at your relative’s home or in your own home, whom do you think about most often? Circle all that apply.
あなたはご親族やお宅の仏壇を拝んだり、お供え物を捧げたりするとき、どなたを思い浮かべて拝みますか。あてはまる番号をいくつでも○で囲んでください。

1	Buddha (for example, Oshaka-sama) 仏（例えば、お釈迦様）	63 / 19.27%, MD = 6
2	*Kami*神	25 / 7.65%, MD = 6
3	My ancestors ご先祖	196 / 59.94%, MD = 6
4	The dead 亡くなった肉親	221 / 67.58%, MD = 6
5	Living family/relatives生きている家族や親類	94 / 28.75%, MD = 6
6	Friends 友人	11 / 3.36%, MD = 6
7	No one in particular特にだれに対してでもない	11 / 3.36%, MD = 6
8	I don’t pray or make offerings at *butsudan* 仏壇を拝んだりすることはない	8 / 2.45%, MD = 6
9	Other その他	16 / 4.89%, MD = 6

13. Do you have a *kamidana* (household Shintô shrine) in your home?
あなたが現在住んでいるお宅に神棚をお持ちですか。

1	Yes　はい	156 / 47.13%
2	No　いいえ	175 / 52.87%
MD		2

14. (If you answered “yes” to number 10), about how often do you worship or pray or make offerings at the *kamidana*? (Circle the appropriate response.)
（問１０番の答えが「はい」の方へ）あなたは、ふだん、お宅の神棚をどれくらい拝んだり、祈ったり、お供え物を捧げたりしますか。あてはまる番号に○をしてください。

1	More than once/day　一日に数回	14 / 8.97%
2	Almost daily　ほぼ毎日	57 / 36.54%
3	4-6 times/week　週に４−６回	3 / 1.92%
4	1-3 times/week　週に１−３回	10 / 6.41%
5	Several times/month　月に数回	25 / 16.03%
6	Several times/year　年に数回	36 / 23.08%
7	Never　全くしない	11 / 7.05%
MD		177

(MD includes those who do not have a *kamidana* from question 13)

15. When you pray or make offerings at the *kamidana* at your relative’s home or in your own home, whom do you think about most often? Circle all that apply.
あなたはご親族やお宅の神棚を拝んだり、お供え物を捧げたりするとき、どなたを思い浮かべて拝みますか。あてはまる番号をいくつでも○で囲んでください。

1	Buddha (for example, Oshaka-sama) 仏（例えば、お釈迦様）	22 / 7.36%, MD = 34
2	*Kami* 神	113 / 37.79%, MD = 34
3	My ancestors ご先祖	102 / 34.11%, MD = 34
4	The dead 亡くなった肉親	86 / 28.76%, MD = 34
5	Living family/relatives生きている家族や親類	79 / 26.42%, MD = 34
6	Friends 友人	7 / 2.34 %, MD = 34
7	No one in particular特にだれに対してでもない	36 / 12.04%, MD = 34
8	I don’t pray or make offerings at *butsudan* 仏壇を拝んだりすることはない	28 / 9.36%, MD = 34
9	Other　その他	13 / 4.35%, MD = 34

16. About how often do you do the following? On a scale ranging from “all the time” to “never”, please circle the appropriate responses.
あなたは、（1）ー（6）それぞれについてどの程度で行いますか。
「いつもする」から「全然しない」までの１～5の番号で答えてください。

	Always いつもする	Often よくする	Some-times 時々する	Rarely あまりしない	Never 全然しない	MD
1) Grave visits other than during *Obon* or *Higan* (All Souls) 盆や彼岸とは別に、お墓参りをする	42 12.80	40 12.20	114 34.76	87 26.52	45 13.72	5
2）Buy amulets or talismans for family or friends　お守りやおふだや絵馬など、魔よけや縁起ものを家族や友人のために買う	13 4.00	19 5.85	103 31.69	88 27.08	102 31.38	8
3) Go to shrines, temples, or churches to pray for things like safety, financial success, or to academic achievements 神社やお寺や教会などに、身の安全、商売繁盛、入試合格などの祈願をしに行く	16 4.94	30 9.26	128 39.51	80 24.69	70 21.60	9
4) Participate in shrine or temple festivals神社・寺などのお祭りに参加する	24 7.34	37 11.31	113 34.56	77 23.55	76 23.24	6
5) Pray for the health of friends or relatives家族や友人などの健康や幸福のために祈る	73 22.74	81 25.23	113 35.20	38 11.84	16 4.98	12
6) Think about the meaning or purpose of life　人生の意味や目的について考える	31 9.60	49 15.17	97 30.03	96 29.72	50 15.48	10

17. Do you have a religion or religious sect you believe in?
あなたは信仰している宗教・宗派はありますか。

1 Yes ある	148 / 46.25%
2 Although not practiced, I have a family religion 特に信仰していないが、家の宗教はある	123 / 38.44%
3 No ない	49 / 15.31%
MD	13

18. What is that religion or sect? Please circle all the appropriate choices.
その宗教・宗派は何ですか。あてはまる番号に全て○をつけてください。

1 Jôdo sect 浄土宗	40 / 12.23
2 Jôdo Shin sect 浄土真宗（本願寺・門徒宗・南無阿弥陀仏）	57 / 17.43
3 Shingon sect 真言宗	7 / 2.14
4 Nichiren sect 日蓮宗	15 / 4.59
5 Zen sect 禅宗（曹洞宗・臨済宗）	27 / 8.26
6 Buddhism (unsure of sect)（宗派わからないが）仏教	2 / 0.61
7 Shintô 神道	4 / 1.22
8 Sôka Gakkai 創価学会	11 / 3.36
9 Tenrikyô 天理教	3 / 0.92
10 Sûkyô Mahikari 崇教真光・真光	1 / 0.31
11 Seichô-no Ie 生長の家	0
12 Shinei-bun Kyôkai 真栄分教会	0
13 PL Kyôdan PL教団	0
14 Konkôkyô 金光教	0
15 Christian (Protestant) クリスチャン（プロテスタント）	1 / 0.31
16 Christian (Catholic) クリスチャン（カトリック）	3 / 0.92
17 Other その他	7 / 2.14
18 Selected more than one religion	18 / 5.50
(19) None (includes those who selected 2 or 3 for question 17)	131 / 40.06
MD	6

19. Regardless of whether you have a religion, which of the following you best?
宗派・宗教はお持ちかどうかを別として、現在のあなたは以下のどれにあたりますか。

1 I am very religious 信心深い	26 / 8.05
2 I am somewhat religious まあまあ信心深い	58 / 17.96
3 I am not religious, but I do things like pray and make offerings 信心深くはないが、拝んだり、お祈りをしたりする	180 / 55.73
4 I am not really religious 信心深くはない	37 / 11.46
5 I am an atheist 無神論者である	22 / 6.81
MD	10

20. Next, I would like to know what people today think about religious "consciousness." Please select the appropriate response for the following.
現在の皆さんの信仰についての意識についておたずねします。それぞれの項目について、あてはまる番号に○をしてください。

	Agree そう思う	Agree Somewhat ややそう思う	Can't say either way どちらともいえない	Disagree Somewhat あまりそう思わない	Disagree そう思わない	MD
1) It's important to respect ancestors 先祖を尊敬するのは大切だ	232 70.52	64 19.45	23 6.99	6 1.82	4 1.22	4
2) *Kami* and *hotoke* exist 神や仏などが存在する	91 28.09	76 23.46	86 26.54	38 11.73	33 10.19	9
3) After people die, they become *kami* and *hotoke* 人間は死んでから、神や仏になる	36 11.58	35 11.25	91 29.26	65 20.90	84 27.01	22
4) There is something like fate that goes beyond human powers人間には、自分の力ではどうすることもできない、運命というものがある	137 41.52	118 35.76	45 13.64	15 4.55	15 4.55	3
5) When I think about it, I am here because of some mysterious forces よく考えてみると、私が今ここで生きているということには、何か神秘的な力がはたらいている	72 22.02	82 25.08	100 30.58	32 9.79	41 12.54	6
6) When I am troubled, *kami* and *hotoke* help and strengthen me 困ったときや悩んでいるとき、神や仏は私を助け強くしてくれる	42 12.80	67 20.43	104 31.71	59 17.99	56 17.07	5

7) When something bad happens to me, I feel that *kami* and *hotoke* are cursing me 私に何か悪いことが起こったとき、神や仏の罰を受けたのではないかと感じる	19 5.81	67 20.43	89 27.22	78 23.85	86 26.30	6
8) *Kami* and *hotoke* protect me　神や仏は、私を見守っている	65 19.94	70 21.47	101 30.98	43 13.19	47 14.42	7
9) When I make a request to *kami* or *hotoke*, I feel as though something will happen 神や仏にお願い事をすると、何となくかなえてくれそうな気がする	27 8.31	85 26.15	110 33.85	53 16.31	50 15.38	8
10）When I pray to *kami* or *hotoke*, my heart/soul is purified and I feel at peace 神や仏に祈ると、心を清めて、安らぎを得る	65 20.06	139 42.90	52 16.05	44 13.58	24 7.41	9
11) There is some kind of mysterious power in Nature (such as the sky, seas, and mountains) 大自然（大空、海、山々など）には何らかの神秘的な力がある	112 34.25	127 38.84	47 14.37	24 7.34	17 5.20	6
12）Religion brings me comfort and strength 宗教から安らぎや力を得ている	39 12.00	63 19.38	95 29.23	57 17.54	71 21.85	8
13）Faith and religiousness are important for mental and physical health 信仰・宗教的なことは、精神と身体の健康に大事なものだ	61 18.65	85 25.99	95 29.05	42 12.84	44 13.46	6

Section C: Socio-demographics あなたご自身のこと

21. What is your sex? あなたの性別は何ですか。

1 Male 男性 212 / 64.05%
2 Female 女性 119 / 35.95%

22. Please fill out the year when you were born. 生まれた年をご記入ください。

1) Meiji 明治 (1868-1911) 0
2) Taisho 大正 (1912-1924) 12 / 3.85%
3) Showa 昭和 (1925-2007) 300 / 96.15%
MD 21

23. Which of the following best describes where do you live now?
あなたが今暮らしている地域は、次のどれにあたりますか。

1 Rural area (farmland, mountain hamlet, fishing village)
農村・山村・漁村 40 / 12.23%
2 Town or small city
地方小都市 131 / 40.06%
3 Capital of prefecture, or large city of equal population size or more
県庁所在地・それと同等以上の大都市 156 / 47.71%

24. What was the last school from which you graduated?
あなたが最後に卒業したはどのような学校ですか。

1 Junior high school under the new system, or elementary school and its equivalents under the old system 62 / 19.08%
新制中学校、旧制小学校（尋常科・高等科）・旧制国民小学校・旧制青年学校

2 High school under the new system, or junior high school and its equivalents under the old system 117 / 36.00%
新制高校、旧制中学校・旧制高等女学校・旧制実業学校・旧制師範学校

3 Junior college and technical college, or high school and its equivalents under the old system 43 / 13.23%
新制短大・新制高専、旧制高校・旧制専門学校・旧制高等師範学校

4 Four-year university 大学 97 / 29.85%

5 Graduate school 大学院 6 / 1.85%

6 Other その他 0

25. If we were to divide the contemporary Japanese society into the following five strata, which would you say you belong to? (Circle one response.)
かりに現在の日本の社会全体を、以下の５つの層にわけるとすれば、あなた自身は、どれに入ると思いますか。あてはまる番号に○をしてください。

1	Upper 上	3 / 0.91%
2	Upper middle 中の上	45 / 13.72%
3	Middle 中の中	161 / 49.09%
4	Lower middle 中の下	106 / 32.32%
5	Lower 下	23 / 3.96%

26. Do you own the home you are presently living in?
あなたのお住まいは持ち家の一戸建てですか。

1	Yes はい	273 / 82.98%
2	No いいえ	56 / 17.02%
MD		4

27. How many people, including yourself, are living with you now?
現在、あなたと一緒に住んでいる方は、自分を含めて全部で何人ですか。

1	47 / 14.42%
2	112 / 34.36%
3	71 / 21.78%
4	48 / 14.72%
5	28 / 8.59%
6	9 / 2.76%
7	8 / 2.45%
8	3 / 0.92%
MD	7

28. How many children do you have? Include adopted and step children.
お子さんは何人いますか。養子・継子の方も含めてお答えください。

0	39 / 12.07%
1	53 / 16.41%
2	136 / 42.11%
3	80 / 24.77%
4	10 / 3.10%
5	2 / 0.62%
6	1 / 0.31%
7	2 / 0.62%
MD	10

29. Are you married?
あなたは、現在、配偶者（つれあいの方）がいらっしゃいますか。

1	Currently married 現在、配偶者がいる	245 / 74.70%
2	Widowed 配偶者とは死別して現在は独身である	45 / 13.72%
3	Divorced 配偶者とは離別して現在は独身である	12 / 3.66%
4	Never married これまで一度も結婚したことはない	24 / 7.32%
5	Other その他	2 / 0.61%

30. Which of the following best describes your current job status. Choose all that apply.
現在のあなたは以下のどれにあたりますか。あてはまる番号に全て○をつけてください。

Executive / Self-employed　経営者・自営業者

1	Fishery, Forestry, Agriculture 農村水産業	11 / 3.40%
2	Mining, Construction　鉱工業・建設業	5 / 1.54%
3	Retail, Service industry, Self-employed 商・サービス・自由業	50 / 15.43%

Regular Employee　被庸者(勤め人)

4	Executive (division, regional , branch, section, school head) 管理職（局長、部長、課長、所長、校長など）	15 / 4.63%
5	Specialist/Technical (doctor, researcher, educator, skilled employee) 専門的・技術的職業（医者、研究者、教員、技術者など）	22 / 6.79%
6	Regular office employee 事務的職業（事務員など）	9 / 2.78%
7	Skilled Laborer (driver, security, construction) 技能的職業（運転手、守衛、修理工、大工など）	11 / 3.40%
8	Sales, Service industry 販売・サービス的職業	9 / 2.78%
9	Laborer 労務職（現業労働従事者）	7 / 2.16%

Family Employee 家族従事者

10	Fishery, Forestry, Agriculture worker 農村水産業	1 / 0.31%
11	Mining, Construction 鉱工業・建設業	1 / 0.31%
12	Retail, Service industry, Self-employed 商・サービス・自由業	6 / 1.85%

Other	
13 Part-time, temporary パート・アルバイト・臨時	21 / 6.48%
14 Retired 退職している	81 / 25.00%
15 Primarily concerned with household duties 主に家事をしている	43 / 13.27%
16 Student / Graduate student 学生・学院生	2 / 0.62%
17 Unemployed 失業中	4 / 1.23%
18 Otherその他	15 / 4.63%
19 Multiple responses	10 / 3.09%
MD	9

31. How much income did your household members earn before taxes during the past year (the total amount of all the household members who share the household budget)? Circle the number beside the most appropriate response.
去年1年の間にお宅の収入（生計をともにしている家族全員の収入の合計、税込み）について、もっとも近い金額ひとつに○をしてください。

Note: US$1 = approximately ¥120 in August 2007

1 Did not have any income 収入はなかった	5 / 1.54%
2 Less than ¥1,000,000	10 / 3.09%
3 ¥1,000,000 - ¥1,999,999	31 / 9.57%
4 ¥2,000,000 - ¥3,999,999	95 / 29.32%
5 ¥4,000,000 - ¥5,999,999	78 / 24.07%
6 ¥6,000,000 - ¥7,999,999	39 / 12.04%
7 ¥8,000,000 - ¥9,999,999	26 / 8.02%
8 ¥10,000,000 - ¥11,999,999	17 / 5.25%
9 ¥12,000,000 or more	23 / 7.10%
MD	9

Appendix D: Survey Sampling Procedures and Mailings

The data for this study come from a systematic random sample of 600 households in Kyôto Prefecture. A self-administered mail questionnaire was chosen as the most appropriate survey style because it is an efficient way to conduct a new survey, or pilot test, such as this. Compared to face-to-face and telephone interviews, mail surveys tend to have slightly lower response rates and response selectivity may also be problematic (see Dillman 1978). In Chapter 4 I discuss this potential bias, and the response rates for face-to-face interviews and mail surveys in Japan are not too different. I am confident, therefore, in the results of this study.

The study population was generated from family names that were randomly selected from the most recently published telephone books (May 2007) for each city, town, and village in the prefecture. Surveys were mailed August 1, 2007, and respondents were requested to return the completed 31-question survey in the postage paid envelopes by August 20, 2007. Of the 600, we received 285 by the first deadline. Reminder cards were mailed to the same 600 households on August 20. From those requests, another 48 were received, for a response rate of 55.50 percent, or 333 surveys, a rate comparable with other recent mail surveys in Japan (see Inaba 2007).

Survey Sampling Procedures

To generate a random sample of the study population, several key steps were taken. First, percentages of each village, town, city, and Kyôto City Ward were tallied based on actual population sizes of the prefecture in 2006 (the most recent data available). Second, I used an Excel Spreadsheet randomizer to generate a random page number from the telephone books for each area. The randomizer also provided a second number that I used to select a household from the page. The formula for the page number

was

INT(1+A5*RAND()),

where A5 represented the total number of pages for that area (e.g., village, town, city, or ward) in the phone book. The formula used to select the household was similar,

INT(1+B5*RAND()),

where B5 represented the total number of households listed on each page. For this number, I used an average per page (range = 25 - 400 depending on number of listings per area). Using these formulas I generated a total of 600 household addresses.

To ensure accurate representation based on the actual populations per area, I used the *Zenkoku Shichôson Yôran* (2006:272-276) to first find out what percentage of the total prefecture's population was represented by each ward of Kyôto City and village, town, and district throughout the prefecture. Table A1 displays the actual populations and the frequencies of households for mailings. The eleven wards are the major sections of Kyôto City, and they total 324 (or 54 percent) of the 600. The figures demonstrate, for example, that I mailed surveys to 26 residents of Kita Ward in Kyôto City and 18 to residents of Fukuchiyama City.

Table A1: Actual Populations and Frequency of Mailings

Area Name	Population	Frequency of mailings
Kita ward	114,789	26
Kamigyô ward	75,732	16
Sakyô ward	153,386	36
Nakagyô ward	95,587	24
Higashiyama ward	39,735	11
Shimogyô ward	72,047	16
Minami ward	91,827	23
Ukyô ward	189,477	45
Fushimi ward	275,743	65
Yamashina ward	131,513	29
Nishikyô ward	151,910	35
Fukuchiyama City	82,590	19
Maidzuru City	91,884	21
Ayabe City	38,535	9
Uji City	188,774	44
Miyaji City	22,138	5
Kameoka City	94,356	22
Jôyô City	81,601	18
Mukô City	54,801	12
Nagaokakyô City	77,813	18
Yawata City	73,218	17
Kyôtanabe City	60,209	14
Kyôtango City	64,365	15
Nantan City	35,885	5
Kitsukawa City	64726	15
Otokuni District	15,332	4
Kuse District	16,848	4
Tsudzuki District	8,616	2
Funai District	17,618	4
Yosa District	2,849	1
Ujidawara Town	10,139	2
Kamo Town	15,999	4
Kasagi Town	1,943	0
Yudzuka Town	5,236	1
Seika Town	35,047	8
Minamiyamashiro Village	3,568	1
Yosano Village	25,583	6
Kyôto Prefecture Total	2,566,420	600

Survey Mailings

Several steps were taken to generate a comparable response rate and at least 300 participants. First, the surveys were mailed from Dôshisha University, a nationally known and top private university in Kyôto. Additionally, I worked with Professor Ajisaka Manabu (Sociology Department, Dôshisha University) to design a survey that was relatively easy to use for this random sample of adults and that was short enough to encourage participation. Dr. Manabu has substantial experience fielding mail surveys in Kyôto, thus I was able to rely on his expertise on Japanese society and on survey construction in Japan. Using a model from one of his previous studies, we drafted a letter of request for participation that included his name, the university with which he is affiliated, and my name (as a Foreign Research Student, *Gaikokujin kenkyûsei*, with the university). All envelopes (to mail the surveys and the enclosed reply envelopes) were official Dôshisha University letterhead envelopes, and responses were sent directly to Dôshisha University. In this manner, I attempted to distinguish this survey as a "scientific study" (*gakujutsu kenkyû*) to persuade recipients to complete the survey. Additionally, each envelope included a ¥500 (US$4.27; $1 = ¥117) gift certificate that could be used at any book store in the nation. This is a typical form of incentive used in survey research in Japan—cash is never used. The gift card was placed in a long envelope by itself that was folded over the survey to help make sure the recipient did not miss the incentive. Finally, a post card was sent to the same 600 households on August 20 as a reminder for those who did not return the questionnaire soon after they received it.

The order of question topics and the layout of the survey were also designed to encourage participation (see Chapter 4 for discussion of question design and pre-testing). Due to the potentially sensitive nature of questions concerning religiousness and mental health, the survey was organized with the health questions first—beginning with general

involvement in social activities (something almost all Japanese take part in) and ending with the CES-D Scale questions. The religion questions followed this section, and they were ordered with common rituals first and more specific beliefs towards the end. The survey concluded with socio-demographic questions (see Appendix C).

Overall, the steps taken to increase the response rate appeared to be relatively successful. The rate of completion and return was slightly higher than major surveys that have offered even more in incentives in mail surveys, such as the JGSS. As I discuss in the Conclusion, however, there is room for improvement, and future studies need to include much larger sample sizes from throughout the nation. In the meantime, this initial study presents an important first glimpse into connections between religiousness and well-being in contemporary Japan.

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Vita

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